12 CCR 2509-8

PROGRAM AREA 7 - CHILD CARE CENTERS/LESS THAN 24-HOUR CARE

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PROGRAM AREA 7 - CHILD CARE CENTERS/LESS THAN 24-HOUR CARE

7.702 - 7.702.2

7.702 RULES REGULATING CHILD CARE CENTERS (LESS THAN 24-HOUR CARE)

Rev. eff. 11/1/98

All child care centers must comply with the "General Rules for Child Care Facilities" as well as the "Rules Regulating Child Care Centers (Less Than 24-Hour Care)" and the "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado." Add source

All infant nurseries and toddler nurseries must meet all of the requirements for centers in 7.702 except where rules specific to infant or toddler nurseries replace other rules. Rules that apply <u>only</u> to infant and toddler nurseries appear in bold type/italics at the end of sections. These rules either replace other rules in that section or are in addition to other rules in that section. The "contents" pages also indicate rules that apply only to infant nurseries and toddler nurseries.

7.702.1 POLICY OF THE COLORADO DEPARTMENT OF HUMAN SERVICES

Rev. eff. 11/1/89

It is the policy of the Colorado Department of Human Services ("the Department") to promote and encourage child care in environments that contribute to the safety, health, protection, and well-being of children. To verify compliance with standards intended to ensure such an environment, the department requires thorough and ongoing appraisals of child care facilities, persons working in the child care profession, and the nature of care provided.

7.702.2 DEFINITIONS

"AAP" MEANS THE AMERICAN ACADEMY OF PEDIATRICS.

"ASTM" MEANS THE AMERICAN SOCIETY FOR TESTING AND MATERIALS. ASTM IS AN ORGANIZATION THAT COORDINATES THE DEVELOPMENT OF VOLUNTARY INDUSTRY STANDARDS THAT SUPPLEMENT MANDATORY STANDARDS SUCH AS INFORMATION TO THE PUBLIC ON STANDARD CONSUMER SAFETY SPECIFICATION ON TOY SAFETY (ASTM F-963) AND OTHER VOLUNTARY STANDARDS THAT COVER SPECIFIC CHILDREN'S PRODUCTS.

"ACCESSIBLE" MEANS CHILDREN BEING ABLE TO OBTAIN EQUIPMENT AND MATERIALS WITHOUT ADULT AID. MAY BE AGE OR DEVELOPMENT SPECIFIC.

"ADVERSE OR NEGATIVE LICENSING ACTION" MEANS A FINAL AGENCY ACTION RESULTING IN THE DENIAL OF AN APPLICATION, THE IMPOSITION OF FINES, OR THE SUSPENSION OR REVOCATION OF A LICENSE OR THE DEMOTION OF SUCH A LICENSE TO A PROBATIONARY LICENSE.

"AGE OF CHILD(REN) IN CHILD CARE," MEANS ANY CHILD(REN) THAT WILL COUNT TOWARDS THE LICENSE CAPACITY, IS BETWEEN THE AGE OF BIRTH TO EIGHTEEN (18) YEARS OF AGE, AND IS IN ON THE PREMISES. THIS INCLUDES STAFF MEMBERS CHILDREN.

"AID OR STAFF AID" MEANS AN INDIVIDUAL WHO ASSISTS THE LEAD TEACHER IN THE CARE OF CHILDREN. AN AIDE OR STAFF AIDE MUST NEVER BE ALLOWED TO SUPERVISE A CHILD(REN) ALONE. THE PROVIDER OR SUBSTITUTE

PROVIDER MUST ALWAYS BE PRESENT AT ALL TIMES WHEN THE AIDE OR STAFF AIDE IS PROVIDING CARE FOR A CHILD(REN).

"APPROVED SLEEPING EQUIPMENT" MEANS EQUIPMENT THAT IS APPROPRIATE FOR THE AGE OF THE CHILD, IS INTENDED FOR SLEEP OR REST, AND ALLOWS THE CHILD FREEDOM OF MOVEMENT IN A SAFE AND SANITARY MANNER.

"AVAILABLE" MEANS MATERIALS OR EQUIPMENT THAT IS NOT IMMEDIATELY ACCESSIBLE TO CHILDREN, BUT WHICH MAY BE INTRODUCED WITH ADULT AID.

"BLOCKED TELEPHONE" MEANS A TELEPHONE THAT WILL NOT ACCEPT TELEPHONE CALLS WHEN CALLER ID SAYS "UNAVAILABLE". THIS DOES NOT INCLUDE TELEPHONES THAT REQUIRE THE CALLER TO ENTER A TEN DIGIT TELEPHONE NUMBER FROM THE TELEPHONE THAT IS BEING CALLED FROM OR REQUIRE THE PROVIDER TO HAVE THEIR NAME LISTED IN A TELEPHONE DIRECTORY.

"CDPHE" MEANS THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT.

"CPR TRAINING" MEANS CARDIOPULMONARY RESUSCITATION FOR ADULT, INFANT, AND CHILD.

'CHILD CARE HEALTH CONSULTANT (CCHC)" MEANS THE LICENSED MEDICAL PROFESSIONAL WITH DELAGATORY AUTHORITY THAT, AT A MINIMUM, DELEGATES THE ADMINISTRATION OF MEDICATIONS AND SPECIAL HEALTH CARE PROCEDURES, BUT MAY MORE COMPREHENSIVELY PROVIDE INFORMATION AND CONSULATION ON A VARIELY OF HEALTH AND SAFETY TOPICS IMPACTING STAFF, CHILDREN AND FAMILIES IN EARLY CARE AND EDUCATION SETTINGS.

"CHILDREN WITH SPECIAL HEALTH CARE NEEDS (CSHCN)" ARE THOSE WHO HAVE OR ARE AT INCREASED RISK FOR CHRONIC PHYSICAL. DEVELOPMENTAL, BEHAVIORAL, OR EMOTIONAL CONDITIONS AND WHO REQUIRE HEALTH AND RELATED SERVICES OF A TYPE OR AMOUNT BEYOND THAT REQUIRED BY CHILDREN GENERALLY. (DEFINITION PROVIDED BY THE MATERNAL AND CHILD HEALTH BUREAU (MCHB) OF THE HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA).

"CHILD SIZED" MEANS EQUIPMENT AND FURNISHING ARE APPROPRIATE TO AGE, I.E. FEET ON THE FLOOR, KNEES UNDER TABLES, ELBOWS ABOVE TABLES, ACCESSIBLE TO CHILDREN WITHOUT ADULT AID. ROUTINE FURNISHINGS MAY BE: TABLES, CHAIRS, BEDS, COTS, CRIBS, AND PLAY EQUIPMENT.

"CHOKING HAZARD" MEANS AN ITEM THAT PRESENTS THE POSSIBILITY OF RESTRICTION OR ELIMINATION OF AIRFLOW INTO THE LUNGS.

"CLEAN" MEANS TO BE FREE OF VISIBLE DIRT AND DEBRIS OR TO REMOVE DIRT AND DEBRIS BY VACUUMING OR SCRUBBING AND WASHING WITH SOAP AND WATER.

"COMPLAINT SEVERITY LEVEL" MEANS THE LEVEL OF SERIOUSNESS (ZERO TO FIVE) THE STATE DEPARTMENT ASSIGNS TO A COMPLAINT REPORTED AGAINST A CHILD CARE FACILITY BASED ON THE SEVERITY OF THE ALLEGATION(S). THE SEVERITY LEVEL ASSIGNED DETERMINES THE TIMEFRAME IN WHICH THE ALLEGATION(S) MUST BE INVESTIGATED BY THE LICENSING SPECIALIST.

"COMPROMISE" MEANS TO EXPOSE TO POSSIBLE LOSS OR DANGER.

"CULTURALLY SENSITIVE" MEANS TO ENCOURAGE, SHARE AND EXPLORE THE DIFFERENCES AND SIMILARITIES OF HERITAGE AND CULTURE, AND ITS EFFECT ON LEARNING, VALUES, AND BEHAVIOR.

"CUSTODIAL OR CONTROL SPEECH" MEANS USING SPEECH TO DIRECT OR INFLUENCE, AUTHORITY OVER A CHILD(REN) BY THE USE OF DIRECTIVE SPEECH TO CHANGE A BEHAVIOR.

"DANGER" MEANS EXPOSURE TO HARM OR INJURY.

"DEROGATORY" MEANS TO BELITTLE, DIMINISH, AND EXPRESS CRITICISM OR A LOW OPINION OF.

"DEVELOPMENTALLY APPROPRIATE" MEANS TO PROVIDE AN ENVIRONMENT WHERE LEARNING EXPERIENCES ARE MEANINGFUL, RELEVANT, AND ARE BASED UPON A CHILD'S INDIVIDUALLY IDENTIFIED STRENGTHS AND WEAKNESSES, INTERESTS, CULTURAL BACKGROUND, FAMILY HISTORY AND STRUCTURE.

"DIRECTOR" MEANS AN INDIVIDUAL THAT HAS BEEN EVALUATED AND RECEIVED A WRITTEN LETTER THAT VERIFIES THAT HE/SHE MEETS THE COLORADO STATE DIRECTOR QUALIFICATION REQUIREMENTS FOR A LARGE CHILD CARE CENTER.

"DISCIPLINE" MEANS TO PUNISH IN ORDER TO BRING A CHILD'S BEHAVIOR UNDER CONTROL.

"DISINFECT" MEANS TO ELIMINATE GERMS FROM INANIMATE SURFACES THROUGH THE USE OF CHEMICALS (E.G., PRODUCTS REGISTERED WITH THE U.S. ENVIRONMENTAL PROTECTION AGENCY AS "DISINFECTANT") OR A SOLUTION OF HOUSEHOLD LIQUID CHLORINE BLEACH AND WATER.

"EARLY CHILDHOOD MENTAL HEALTH CONSULTANT" (ECMHC) MEANS A CONSULTANT WHO PROVIDES CULTURALLY SENSITIVE AND PRIMARILY INDIRECT SERVICES FOR CHILDREN, BIRTH THROUGH SIX YEARS OF AGE IN GROUP CARE AND EARLY EDUCATION SETTINGS.

"EARLY CHILDHOOD MENTAL HEALTH CONSULTATION SERVICES" MEANS THE PROVISION OF SERVICES THAT PROMOTE SOCIAL AND EMOTIONAL DEVELOPMENT IN CHILDREN AND TRANSFORM CHILDREN'S CHALLENGING BEHAVIORS. THIS INCLUDES CAPACITY BUILDING FOR PROVIDERS AND FAMILY MEMBERS; DIRECTLY OBSERVING AND INTERACTING WITH CHILDREN AND THE CARE GIVING ENVIRONMENT; AND DESIGNING AND MODELING INTERVENTIONS THAT INVOLVE CHANGES IN THE BEHAVIORS OF FAMILY MEMBERS AND CAREGIVERS. IT ALSO INCLUDES COLLABORATION WITH PROVIDERS, EMPLOYEES, VOLUNTEERS, AND FAMILY MEMBERS AND CAREGIVERS WHO INTERVENE DIRECTLY WITH CHILDREN IN GROUP CARE, EARLY EDUCATION AND/OR HOME SETTINGS.

"EQI/T" MEANS THE DEPARTMENT APPROVED EXPANDING QUALITY INFANT/TODDLER TRAINING FOR CHILD CARE PROVIDERS THAT IS AVAILABLE STATEWIDE AND IS FREE TO PROVIDERS.

"EARLY CHILDHOOD TEACHER" REFERS TO A PROVIDER RESPONSIBLE FOR A SINGLE GROUP OF CHILDREN. THE ECT MUST BE AT LEAST 21 YEARS OF AGE AND MUST BE QUALIFIED FOR THE POSITION.

"EMERGENCY" MEANS A SUDDEN, URGENT, USUALLY UNEXPECTED OCCURRENCE OR OCCASION REQUIRING IMMEDIATE ACTION.

"EMERGENCY OR URGENT SITUATION" MEANS A SITUATION THAT IS CRITICAL IN NATURE, WHICH REQUIRES IMMEDIATE ACTION.

"EMPLOYEE" MEANS PAID OR UNPAID INDIVIDUAL THAT CARES FOR OR, ASSISTS WITH THE CARE OF CHILDREN.

"EQUALLY QUALIFIED" MEANS THAT THE EMPLOYEE OR SUBSTITUTE PROVIDER HAS THE SAME REQUIRED TRAINING AND QUALIFICATIONS AS THE PERSON THEY ARE REPLACING.

"EXTREME WEATHER" MEANS WEATHER CONDITIONS THAT REQUIRE UNUSUAL OR IMMEDIATE ACTION TO REDUCE EXPOSURE TO HARM OR INJURY.

"FIRST AID TRAINING" MEANS TRAINING IN WHICH A PERSON LEARNS TO REACTS TO INJURIES AND TO PERFORMS SIMPLE EMERGENCY MEDICAL CARE PROCEDURES BEFORE EMERGENCY MEDICAL PROFESSIONALS ARE AVAILABLE AS NECESSARY.

"FLEXIBILITY" MEANS CENTER STAFF HAS THE READY CAPABILITY TO ADAPT TO NEW, DIFFERENT, OR CHANGING REQUIREMENTS OF PARENT(S) OR GUARDIAN(S) FOR CHILD CARE.

"FREQUENTLY" MEANS TO OCCUR OFTEN; MANY TIMES AND AT SHORT INTERVALS.

"GENTLE PHYSICAL HOLDING" MEANS TO CAREFULLY HOLD A CHILD WITH THE ARMS, WITHOUT FORCE.

"GRADE LEVEL" MEANS MAIN FLOOR OF THE BUILDING WITHOUT ANY STEPS TO ENTER OR EXIT THE BUILDING.

"GROUP CARE" MEANS THE CARE OF MORE THAN FOUR (4) CHILDREN UNRELATED TO THE CAREGIVER AND UNDER EIGHT (8) YEARS OF AGE.

"GUIDANCE" MEANS A WAY OF TEACHING THAT EMPOWERS CHILDREN TO MAKE DECISIONS THAT ARE ETHICAL, INTELLIGENT, AND SOCIALLY RESPONSIBLE.

"GUIDANCE APPROACH" MEANS THE USE OF GUIDANCE, DISTINCT FROM DISCIPLINE, TO REDUCE THE NEED FOR AND RESOLVE THE OCCURRENCE OF MISTAKEN BEHAVIOR IN WAYS THAT ARE NON-PUNITIVE.

"HARSH TREATMENT" MEANS TREATMENT THAT IS UNGENTLE AND UNPLEASANT IN ACTION OR EFFECT. UNPLEASANTLY SEVERE; STERN; OR CRUEL.

"HEALTH CARE PLAN" MEANS THE DOCUMENT CONTAINS WRITTEN INSTRUCTIONS ABOUT A SPECIFIC HEALTH CONDITION INCLUDING THE WHEN AND HOW SPECIFIC INTERVENTIONS ARE TO BE CARRIED OUT IN A SCHOOL OR CHILD CARE SETTING. THIS DOCUMENT SHOULD BE SIGNED BY THE CHILD'S HEALTH CARE PROVIDER AND PARENT. HEALTH CARE PLANS CAN BE COLLABORATIVELY CREATED BY THE CHILD CARE HEALTH CONSULTANT, THE CHILD'S PARENTS, HEALTH CARE PROVIDER AND CENTER STAFF, AND ARE

NECESSARY FOR THE CARE OF CHILDREN WITH CHRONIC HEALTH CARE CONDITIONS SUCH AS ASTHMA, SEIZURE DISORDER, DIABETES, OR SEVERE ALLERGY. HEALTH CARE PLANS MAY ALSO GUIDE THE CARE OF CHILDREN WITH ACUTE CONDITIONS THAT MAY NEED SHORT-TERM SPECIAL MANAGEMENT IN THE GROUP CARE SETTING SUCH AS CHILD RETURNING TO CARE WITH A CAST, OR AFTER A SURGICAL INTERVENTION.

HEALTH CARE PROFESSIONAL" MEANS AN ORGANIZATION OR PERSON WHO DELIVERS PROPER HEALTH CARE IN A SYSTEMATIC WAY PROFESSIONALLY TO ANY INDIVIDUAL IN NEED OF HEALTH CARE SERVICES.

"HEALTH CARE PROVIDER'S SCOPE OF PRACTICE" MEANS THE BOUNDARIES AND RULES WITHIN WHICH A FULLY QUALIFIED MEDICAL PRACTITIONER, WITH SUBSTANTIAL AND APPROPRIATE TRAINING, KNOWLEDGE, AND EXPERIENCE, MAY PRACTICE IN A FIELD OF MEDICINE OR OTHER SPECIFICALLY DEFINED FIELD. SUCH PRACTICE IS GOVERNED BY REQUIREMENTS FOR PROFESSIONAL ACCOUNTABILITY.

"HOME REMEDY" MEANS A TREATMENT USED TO TRY AND CURE OR TREAT A DISEASE OR AILMENT THAT USES COMMON HOUSEHOLD ITEMS OR FOODS.

"IF APPLICABLE" MEANS WHETHER THE RULE SHOULD BE APPLIED DEPENDING ON THE CIRCUMSTANCES OF THE SITUATION.

"IMMEDIATELY" MEANS WITHOUT DELAY OR HESITATION, WITHOUT ANY INTERVAL OF TIME.

"INACCESSIBLE" MEANS UNREACHABLE, UNATTAINABLE, UNAVAILABLE, UNOBTAINABLE OR UNTOUCHABLE.

"INFANT NURSERY SUPERVISOR (INS)" REFERS TO A PROVIDER WHO IS RESPONSIBLE FOR THE SUPERVISION OF STAFF AND CHILDREN IN THE INFANT NURSERY. THE INS MUST BE AT LEAST TWENTY-ONE (21) YEARS OF AGE AND MUST BE QUALIFIED FOR THE POSITION.

"INFANT STAFF AID" REFERS TO A PROVIDER WHO IS AT LEAST EIGHTEEN (18) YEARS OF AGE AND WORKS UNDER THE DIRECT SUPERVISION OF THE INFANT NURSERY SUPERVISOR.

"INTERACTIVE LEARNING" MEANS A METHOD OF LEARNING THROUGH HANDS ON ACTIVITIES THAT HELPS A CHILD GAIN KNOWLEDGE AND SKILLS BY CONNECTING WITH INFORMATION AND EXPERIENCES PROVIDED BY THE PROVIDER.

"INTOXICATED" MEANS THAT A PERSON IS UNDER THE INFLUENCE OF DRUGS OR ALCOHOL TO THE POINT THAT HIS/HER ACTIONS AND/OR BEHAVIOR PRESENTS AN IMMEDIATE DANGER TO HER/HIMSELF OR OTHERS.

"KINDERGARTEN TEACHER" REFERS TO A PROVIDER HAVING THE SAME QUALIFICATIONS AS A LARGE CENTER DIRECTOR OR BE STATE CERTIFIED OR LICENSED AS AN ELEMENTARY OR EARLY CHILDHOOD TEACHER.

"LANGUAGE DEVELOPMENT MATERIALS" MEANS MATERIALS THAT FOCUS ON THE DEVELOPMENT OF LISTENING AND SPEAKING SKILLS, AND CONTAINS EXPERIENCES WHICH FAMILIARIZE CHILDREN WITH PRE-READING AND PRE-WRITING ACTIVITIES.

"LEAD POISONING" MEANS POISONING BY A TOXIC METAL THAT IS FOUND IN AND AROUND BUILDINGS, IN LEAD-BASED PAINT, CHIPPING PAINT, OR LEAD

DUST FROM DETERIORATED PAINT. LEAD MAY CAUSE A RANGE OF HEALTH EFFECTS, FROM BEHAVIOR PROBLEMS AND LEARNING DISABILITIES, TO SEIZURES AND DEATH.

"LEGAL SIGNATURE" MEANS THE PARENT'S FULL SIGNATURE THAT INCLUDES BOTH THE FIRST AND LAST NAME.

"LOCKDOWN DRILL" MEANS A DRILL IN WHICH THE OCCUPANTS OF A BUILDING ARE RESTRICTED TO THE INTERIOR OF THE BUILDING AND THE BUILDING IS SECURED.

"LOST CHILD" MEANS THE CENTER STAFF ARE UNABLE TO FIND THE CHILD, OR THE CHILD IS NO LONGER IN THE CARE OR SUPERVISION OF A PROVIDER.

"MENTAL HEALTH PRACTITIONER" MEANS A MENTAL HEALTH PROFESSIONAL "WHO OFFERS SERVICES FOR THE PURPOSE OF IMPROVING AN INDIVIDUAL'S MENTAL HEALTH OR TO TREAT MENTAL ILLNESS.

"MUCH OF THE DAY" MEANS MORE THAN FIFTY (50) PERCENT OF THE DAY THE CLASSROOM IS OPEN.

"NATIONALLY RECOGNIZED" MEANS TO BE KNOWN IN THE MAJORITY OF BUSINESSES OR RESIDENTIAL AREAS OF THE UNITED STATES AND THAT MAY MEET LOCAL OR NATIONAL ACCREDITATION STANDARDS.

"NURSE DELEGATION" MEANS THE ASSIGNMENT TO A COMPETENT INDIVIDUAL THE AUTHORITY TO PREFORM IN A SELECTED SITUATION A SELECTED NURSING TASK THAT IS INCLUDED IN THE PRACTICE OF PROFESSIONAL NURSING (DEFINITION FROM CHAPTER XIII RULES AND REGULATIONS REGARDING THE DELEGATION OF NURSING TASKS).

"OFFERED" MEANS MATERIALS, EQUIPMENT OR ACTIVITIES, INCLUDING MEALS, WHICH ARE PRESENTED AS OPTIONS TO CHILDREN BUT ARE NOT REQUIRED OR FORCED, TO BE UTILIZED OR ENGAGED.

"ON OCCASION" MEANS FROM TIME TO TIME, A SPECIAL EVENT OR CEREMONY, OR IRREGULARLY.

"ORGANIC MATERIALS" MEANS MATERIALS RELATING TO, OR DERIVED FROM LIVING ORGANISMS.

"OTHER APPROVED METHOD" MEANS ANY ALTERNATIVE METHOD THAT HAS BEEN OBSERVED TO BE SAFE AND ADEQUATE FOR THE CARE OF CHILDREN AND IS NOT SPECIFICALLY LISTED IN REGULATION. ANY "OTHER APPROVED METHOD" SHALL BE APPROVED IN WRITING BY THE DEPARTMENT.

"PATTERN" MEANS REPEATING AN ACTIVITY AT REGULAR INTERVALS.

"PEDODONTIST" MEANS A PEDIATRIC DENTIST, SPECIALIZING IN CHILDREN FROM BIRTH TO FOUR (4) YEARS OF AGE.

"PERIODICALLY" MEANS AN ONGOING EVENT OR ACTIVITY THAT OCCURS WITHOUT AN ESTABLISHED PATTERN.

"PERMANENT CLIMBING EQUIPMENT" MEANS CLIMBING EQUIPMENT INSTALLED THAT IS STABLE, CANNOT BE OVERTURNED OR DISPLACED, AND CANNOT BE MOVED OR RELOCATED TO ANOTHER AREA WITHOUT ASSISTANCE.

"PHYSICAL RESTRAINT" MEANS THE USE OF BODILY, PHYSICAL FORCE TO INVOLUNTARILY LIMIT AN INDIVIDUAL'S FREEDON OF MOVEMENT; EXCEPT THAT PHYSICAL RESTRAINT DOES NOT INCLUDE THE HOLDING OF A CHILD BY ONE ADULT FOR THE PURPOSES OF CALMING OR COMFORTING THE CHILD.

"POLICIES" ARE A DEFINITE COURSE OR METHOD OF ACTION SELECTED TO GUIDE AND DETERMINE PRESENT AND FUTURE DIRECTION.

"POTENTIAL THREAT" MEANS THE POSSIBLE EXPOSURE TO HARM OR INJURY.

"PRESCRIPTIVE AUTHORITY" MEANS THE LEGAL RIGHT OF A MEDICAL PERSON TO PRESCRIBE MEDICATIONS UNDER COLORADO LAW.

"PROTECTIVE EQUIPMENT" MEANS THE USE OF PROTECTIVE HEAD, KNEE, ELBOW AND ANKLE EQUIPMENT TO PROTECT A CHILD RIDING ON A SCOOTER, BICYCLE, SKATEBOARD OR ROLLERBLADES.

"PROTECTIVE SURFACING" MEANS AN APPROVED MATERIAL, MEETING ASTM STANDARDS, THAT IS USED BENEATH CLIMBING EQUIPMENT AND IS DESIGNED TO PROTECT A CHILD WHO FALLS FROM THE HIGHEST DESIGNATED PLAY SURFACE ON A PIECE OF EQUIPMENT TO THE PROTECTIVE SURFACING BELOW. REFER TO SECTION 7.707.21 FOR INFORMATION ON HOW TO OBTAIN THE STANDARDS.

"PROVIDER" MEANS ANY PERSON RESPONSIBLE FOR PROVIDING DIRECT CARE, SUPERVISION AND EDUCATION TO CHILD(REN) IN CARE AT A CHILD CARE CENTER.

"PSITTACINE BIRDS", MEANS ALL BIRDS COMMONLY KNOWN AS PARROTS, COCKATOOS, COCKATIELS, MACAWS, PARAKEETS, LOVEBIRDS, LORIES OR LORIKEETS, AND OTHER BIRDS OF THE ORDER PSITTACIFORME, MAY ALSO BE CALLED HOOK BILLS BECAUSE THE UPPER BEAK IS TURNED DOWNWARD.

"PUNISHED" MEANS TO IMPOSE A PENALTY ON A PERSON. THE CAUSES FOR PUNISHMENT MAY BE FOR A FAULT, OFFENSE OR VIOLATION.

"REGIONALLY ACCREDITED" MEANS COLLEGES AND UNIVERSITIES WHICH EARN REGIONAL ACCREDITATION STATUS BY MEETING ACCEPTABLE LEVELS OF QUALITY AND PERFORMANCE. THE ACCREDITING BODIES FOR HIGHER EDUCATION ARE MIDDLE STATES ASSOCIATION OF COLLEGES AND SCHOOLS, NORTHWEST ASSOCIATION OF COLLEGES AND SCHOOLS, NORTH CENTRAL ASSOCIATION OF COLLEGE AND SCHOOLS, NEW ENGLAND ASSOCIATION OF COLLEGES AND SCHOOLS, AND WESTERN ASSOCIATION OF COLLEGES AND SCHOOLS.

"REGULAR BASIS" MEANS OCCURRING WITH NORMAL FREQUENCY OR ROUTINE SCHEDULE.

"REGULATIONS" ARE AN ORDER ISSUED BY EXECUTIVE AUTHORITY OF A GOVERNMENT AND HAVING THE FORCE OF LAW.

"REMODELING" MEANS ANY TIME THE FACILITY MUST PULL A BUILDING PERMIT.

"RESTRAINT" MEANS ANY METHOD OR DEVICE USED TO INVOLUNTARILY LIMIT FREEDOM OF MOVEMENT. INCLUDING, BUT NOT LIMITED TO, BODILY PHYSICAL FORCE, MECHANICAL DEVICES, OR CHEMICALS.

"REVERSE EVACUATION DRILL" MEANS A DRILL IN WHICH PERSONS SEEK SHELTER AND SAFETY INSIDE A BUILDING WHEN SAID PERSONS ARE OUTSIDE THE BUILDING AND ARE FACED WITH A THREAT, SUCH AS AN ARMED INDIVIDUAL OR A DANGEROUS ANIMAL.

"ROUTINE MEDICATIONS" MEANS ANY PRESCRIBED OR OVER THE COUNTER (OTC) ORAL, TOPICAL, OR INHALED MEDICATION, OR UNIT DOSE EPINEPHRINE, THAT IS ADMINISTERED PURSUANT TO SECTION 26-6-110, C.R.S.

"SAFE" MEANS FREE OF HAZARDS POSING DANGER OF INJURY INCLUDING, BUT NOT LIMITED TO, "KEEP OUT OF REACH" ITEMS, PROTRUSIONS, BROKEN ITEMS, AREAS OF ENTRAPMENT, STRANGULATION OR CHOKING HAZARDS, INSUFFICIENT CUSHIONING, POISONOUS CHEMICALS, ETC.

"SANITIZED OR SANITARY" MEANS TO REMOVE FILTH OR SOIL AND SOME SMALL BACTERIA. FOR AN INANIMATE SURFACE TO BE CONSIDERED SANITARY THE SURFACE MUST BE CLEAN AND THE NUMBER OF GERMS MUST BE REDUCED TO SUCH A LEVEL THAT DISEASE TRANSMISSION BY THAT SURFACE IS UNLIKELY. THIS PROCEDURE IS LESS RIGOROUS THAN DISINFECTION AND IS APPLICABLE TO A WIDE VARIETY OF ROUTINE HOUSEKEEPING PROCEDURES.

"SATISFACTORY EXPERIENCE" MEANS THE ADEQUATE PRACTICAL KNOWLEDGE, SKILL OR PRACTICE NECESSARY.

"SERIOUS" MEANS AN INJURY OR ILLNESS OF AN URGENT NATURE NEEDING IMMEDIATE EMERGENCY ATTENTION.

"SERVING" MEANS AN AMOUNT OF FOOD OR BEVERAGE THAT IS APPROPRIATE TO MEET A CHILD'S NUTRITIONAL AND DEVELOPMENTAL NEEDS.

"SEVERE WEATHER DRILL" MEANS A DRILL IN WHICH OCCUPANTS OF A BUILDING SEEK SHELTER APPROPRIATE TO THE SEVERE WEATHER THREAT, SUCH AS A BLIZZARD, ELECTRICAL STORM, FLOOD OR TORNADO.

"SHELTER-IN-PLACE DRILL" MEANS A DRILL IN WHICH THE OCCUPANTS OF A BUILDING SEEK SHELTER IN THE BUILDING FROM AN EXTERNAL THREAT.

"SOCIAL-EMOTIONAL DEVELOPMENT" MEANS THE DEVELOPMENT OF SELF-AWARENESS AND SELF-REGULATION AS REFLECTED IN THE DESIRE AND GROWING ABILITY TO CONNECT WITH OTHERS AND THE ABILITY TO EXPERIENCE, EXPRESS AND REGULATE A FULL RANGE OF EMOTIONS, TO ACTIVELY PARTICIPATE IN ACTIVITIES, MAKE SUCESSFUL TRANSITIONS FROM ONE ACTIVITY TO ANOTHER, AND COOPERATE IN THE CONTEXT OF RELATIONSHIPS WITH OTHERS.

"SOFT BEDDING" MEANS, BUT IS NOT LIMITED TO, ANY SOFT SLEEP SURFACE LIKE A WATER BED, SOFA, PILLOWS, BUMPER PADS, SOFT MATERIALS LIKE FLUFFY BLANKETS, THICK BLANKETS AND/OR COMFORTERS, SHEEP SKINS, PLUSH TOYS, AND STUFFED ANIMALS.

"SOME" MEANS GREATER THAN TWO (2) TYPES.

"STAFF" MEANS ALL PEOPLE WORKING IN A FACILITY TO INCLUDE TEACHER, DIRECTOR, AND SUPPORT PERSONNEL.

"STAFF AIDE" IS AN INDIVIDUAL WHO IS AT LEAST SIXTEEN (16) YEARS OF AGE AND WORKS DIRECTLY UNDER THE SUPERVISION OF A DIRECTOR OR LEAD TEACHER.

STANDARD (FORMALLY UNIVERSAL PRECAUTIONS) PRECAUTIONS" MEANS AN APPROACH TO INFECTION CONTROL WHICH TREATS ALL HUMAN BLOOD AND CERTAIN BODY FLUIDS AS IS KNOWN TO BE INFECTED BY HIV, HEPATITS B AND OTHER BLOOD BORNE PATHOGENS. (DEFINITION PROVIDED BY OSHA BLOODBORNE PATHOGENS STANDARD 1910.1030).

"SUBSTITUTE PROVIDER" MEANS A PAID, VOLUNTEER OR CONTRACT INDIVIDUAL RESPONSIBLE FOR CARING FOR THE CHILDREN IN THE CAPACITY OF THE PROVIDER DURING THE PROVIDER'S ABSENCE.

"SUFFICIENT" MEANS ALLOWING SIMULTANEOUS ACCESS FOR TWENTY-FIVE (25)% OF THE CHILDREN PRESENT.

"SWEET FOODS" MEANS A SWEET BREAD OR GRAIN PRODUCT THAT IS HIGH IN FAT AND/OR SUGAR.

"USDA" MEANS THE UNITED STATES DEPARTMENT OF AGRICULTURE.

"UNDER THE INFLUENCE" MEANS THAT A PERSON IS UNDER THE INFLUENCE OF DRUGS OR ALCOHOL TO THE POINT THAT HIS/HER ACTIONS AND/OR BEHAVIOR PRESENTS AN IMMEDIATE DANGER TO HER/HIMSELF OR OTHERS.

"URGENT" MEANS AN UNFORESEEN COMBINATION OF CIRCUMSTANCES THAT REQUIRES IMMEDIATE ATTENTION.

'USE ZONE' (FORMALLY "FALL ZONE") MEANS THE DISTANCE THAT A CHILD CAN FALL FROM ELEVATED EQUIPMENT BASED UPON THE CHILD'S AGE AND SIZE.

"VARYING" MEANS TO BE AT DIFFERENT TIMES OR DIFFERENT DAYS; TO GIVE VARIETY TO ACTIVITIES: TO BEAR NO RESEMBLANCE TO A PRIOR ACTIVITY.

"VERBAL ABUSE" MEANS ABUSIVE BEHAVIOR INVOLVING THE USE OF LANGUAGE THAT IS DEMEANING AND IS INTENDED TO INSULT, MANIPULATE, RIDICULE, OR OFFEND. HARMFUL ACTS, AND THE USE OF HARSH OR COARSE LANGUAGE OFTEN CHARACTERIZE IT.

"VOLUNTEER" MEANS A PERSON WHO PERFORMS A SERVICE WILLINGLY AND WITHOUT PAY.

"WATER FEATURES" MEANS AN ARTIFICIALLY CONFINED BODY OF WATER, WHICH IS USUALLY SMALLER THAN A LAKE. THE POND CAN BE DECORATED WITH LARGE AND SMALL ROCKS, WATER LILIES, POND PLANTS, TADPOLE, FISH, AND HAVE FEATURES SUCH AS LIGHTS, WATERFALLS AND FAST OR SLOW MOVING WATER.

"WRITTEN MEDICATION ORDER" MEANS A DOCUMENT FOR A SPECIFIC MEDICATION FOR A SPECIFIC CHILD SIGNED BY THE CHILD'S HEALTH CARE PROVIDER. THIS MUST BE A PERSON WITH PRESCRIPTIVE AUTHORITY. THE ORDER SHALL INCLUDE THE CHILD'S NAME, MEDICATION, DOSE, TIME, ROUTE, AND FOR HOW LONG THE MEDICINE IS TO BE GIVEN. ORDERS FOR CHILDREN OVER TWO YEARS OF AGE CAN ONLY BE VALID FOR A PERIOD OF UP TO ONE YEAR, BUT SHALL ONLY BE FOR A VERY BRIEF DURATION OF TIME AS WELL. CHILDREN UNDER TWO MAY NEED WRITTEN MEDICATION ORDERS MORE FREQUENTLY SINCE THE DOSAGE OF THE MEDICATION WILL CHANGE WITH

THE CHILD'S WEIGHT. WRITTEN ORDERS SHALL ALSO INCLUDE INFORMATION ON THE REASON THE MEDICATION IS BEING GIVEN, POTENTIAL SIDE EFFECTS AND ANY SPECIAL INSTRUCTIONS FOR ADMINISTRATION.

7.702.2 DEFINITIONS

- Rev. eff. 2/1/05 A. Child care centers, less than 24-hour care (referred to as "centers"), provide comprehensive care for children when the parents or guardians are employed or otherwise unavailable to care for the children. Child care centers may operate 24 hours a day, but the children are cared for at the center fewer than 24 hours a day.
 - B. Child care centers/"EARLY CARE AND EDUCATION CENTERS" ARE, less than 24-hour programs of care (REFERRED TO AS "CENTERS"), include the following types of facilities:
 - 1. A "large child care center" provides care for 16 21 or more children between the ages of 2 1/2 and 16 years.
 - 2. A "small child care center" provides care for 5 through 15 20 children between the ages of 2 ½ and 16 years.
 - An "infant nursery" provides care for children between the ages of 6 weeks and 18 months.
 - 4. A "toddler nursery" provides care for children between the ages of 12 months (when walking independently) and 36 months.
 - 5. "Preschool" is a part-day child care program for 5 or more children between the ages of 2½ and 7 years. "
 - 6. "Kindergarten" provides a program for children the year before they enter the first grade.
 - 7. "FULL DAY PROGRAM" ENROLLS CHILDREN FOR FOUR (4) OR MORE HOURS PER DAY.
 - 8. "PART DAY PROGRAM" INCLUDES PRESCHOOLS THAT ENROLL CHILDREN FOR LESS THAN FOUR (4) HOURS PER DAY. CHILDREN CANNOT BE IN ATTENDANCE FOR MORE THAN FOUR (4) HOURS.
 - 9. 7. A "drop-in child care center" provides occasional care for 40 or fewer children between the ages of 12 months and 13 years of age for short periods of time not to exceed six (6) hours in any 24-hour period of time or fifteen (15) hours in any seven (7) day period of time.

7.702.3 ADMINISTRATION

Rev. eff. (See also "Administration" at 7.701.5, General Rules for Child Care Facilities) 11/1/98

- A. The governing body must shall appoint a director who will be responsible to the governing body and who will be delegated the authority and responsibility for the operation of the center according to its defined purpose and policies.
- B. THE GOVERNING BODY OF A PUBLIC SCHOOL SYSTEM OPERATING AN ON-SITE EARLY CARE AND EDUCATION CENTER, SHALL APPOINT A

QUALIFIED DIRECTOR OR QUALIFIED PUBLIC SCHOOL PRINCIPAL WHO WILL BE RESPONSIBLE TO THE GOVERNING BODY AND WHO WILL BE DELEGATED THE AUTHORITY AND RESPONSIBILITY FOR THE OPERATION OF THE CENTER ACCORDING TO ITS DEFINED PURPOSE AND POLICIES IN ACCORDANCE WITH LICENSING RULES.

- C B. The governing body must formulate the purpose and policies to be followed by the center. It must have a regular planned review of such purpose and policies to determine that the center is in compliance with licensing rules.

 THE GOVERNING BODY SHALL DEVELOP THE PURPOSE AND POLICIES OF THE CENTER AND CONDUCT AN ANNUAL REVIEW OF SUCH PURPOSE AND POLICIES TO ENSURE THAT THE CENTER IS IN COMPLIANCE WITH INCLUDING BUT NOT LIMITED TO: LICENSING RULES, INCLUDING THE SPECIFIED AGES, CAPACITIES AND EXHIBITS AS INDICATED ON THE FACILITY LICENSE. WRITTEN DOCUMENTATION OF THE ANNUAL REVIEW SHALL BE ON FILE AND AVAILABLE FOR REVIEW BY THE DIVISION OF CHILDCARE.
- DC. The governing body is responsible for providing necessary facilities, adequate financing, qualified personnel, services, and program functions for the safety and well-being of children in accordance with these rules.
- ED. The director of the center is responsible for administering the center in accordance with licensing rules. The director must SHALL plan and supervise the child development program, plan for or participate in selection of staff, plan for orientation and staff development, supervise and OR coordinate staff activities, PARTICIPATE IN THE evaluateION OF staff performance, and participate in the program activities.
- F. THE DIRECTOR IS RESPONSIBLE FOR ENSURING THAT ALL STAFF ARE FAMILIAR WITH LICENSING REGULATIONS WITHIN NINETY (90) DAYS OF THE FIRST DAY OF EMPLOYMENT. THE DIRECTOR IS RESPONSIBLE FOR ENSURING THE FACILITY IS IN COMPLIANCE WITH LICENSING REGULATIONS.
- GE. The director of a part-day preschool program operated by an accredited public school system is responsible for administering the center in accordance with licensing rules, and supervEising the child development program AND PARTICIPATE IN PROGRAM ACTIVITIES. The director OR STAFF DESIGNATED BY THE GOVERNING BODY SHALL plan for or participate in orientation and staff development, supervise or coordinate staff activities, AND participate in the evaluation of staff performance, and participate in program activities.

7.702.4 POLICIES AND PROCEDURES

7.702.41 Statement of Policies and Procedures

AT THE TIME OF ENROLLMENT THE CENTER SHALL GIVE THE PARENT(S) OR GUARDIAN(S) AND STAFF AT DATE OF HIRE, A WRITTEN STATEMENT OF THE CENTERS POLICIES AND PROCEDURES. BY SIGNING THE POLICIES AND PROCEDURES DOCUMENT, THE PARENT OR GUARDIAN AGREES TO FOLLOW, ACCEPTS THE CONDITIONS, AND GIVES AUTHORIZATION AND APPROVAL FOR THE ACTIVITIES DESCRIBED IN THE POLICIES.

THE WRITTEN POLICIES AND PROCEDURES SHALL BE DEVELOPED, IMPLEMENTED AND FOLLOWED, INCLUDING ALL UPDATES AND CHANGES, AND SHALL INCLUDE AT A MINIMUM THE FOLLOWING INFORMATION:

Rev. eff. A written statement of the center's policies and procedures must be made 11/1/01 available to parents and quardians and to staff and must include the following:

- A. The center's purpose and its philosophy on child care.
- B. The ages of children accepted.
- C. Services offered for special needs children CHILDREN WHO HAVE DISABILITIES OR DEVELOPMENTAL DELAYS, WHICH INCLUDES CHILDREN WITH SOCIAL, EMOTIONAL AND BEHAVIORAL NEEDS, AND IN ALIGNMENT WITH THE TRAINING AND ABILITY OF STAFF AND in compliance with the Americans with Disabilities Act.
- D. The hours the center is open, specific hours during which special programs are offered, holidays when the center is closed.

 HOURS OF OPERATION OR INDIVIDUAL HOURS AGREEMENT TO INCLUDE REGULARLY CLOSED DAYS AND APPLICABLE SPECIAL PROGRAM HOURS; POLICY ON CLOSURE DUE TO EMERGENCY AND UNSCHEDULED CLOSURES.
- E. The policy regarding inclement and excessively hot weather.

 ADVERSE WEATHER PRECAUTIONS TO INCLUDE TEMPERATURE EXTREMES; INCLEMENT WEATHER EXPECTATIONS AND PROCEDURES, AND FEE EXPECTATIONS IF CENTER IS CLOSED DURING INCLEMENT WEATHER AND INSTRUCTIONS FOR NOTIFICATION OF CLOSURE.
- F. The procedure concerning admission, and registration of children.
- G. THE POLICY CONCERNING RECRUITMENT, ADMISSION AND REGISTRATION OF CHILDREN, INCLUDING CHILDREN WITH EXEPTIONAL SOCIAL, EMOTIONAL, BEHAVIORAL, PHYSICAL, DISABILITY SPECIFIC OR DEVELOPMENTAL NEEDS.
- H. An itemized fee schedule OR INDIVIDUAL FEE AGREEMENT; FEE EXPECTATIONS WHEN FEES ARE REIMBURSED, WHEN CHILD DOES NOT ATTEND PROGRAM; WHEN CHILD IS REQUESTED TO LEAVE THE PROGRAM; AND FEES FOR FIELD TRIPS.
- I. PROCEDURE, INCLUDING FEES, WHEN A CHILD ARRIVES OR DEPARTS OTHER THAN EXPECTED AND AGREED UPON CARE HOURS.
- J. PARENT AND PROVIDER RESPONSIBILITIES FOR SPECIAL ACTIVITIES OR PROGRAMS OUTSIDE OF THE LICENSED FACILITY, SUCH AS INCLUSION AND/OR EXCLUSION OF CHILDREN AND THE PAYMENT OF ADDITIONAL FEES.
- K. H. The procedure for identifying AND MONITORING where children are at all times.
- L. 4. The policy on-discipline. GUIDANCE, POSITIVE INSTRUCTION, SUPPORTING POSITIVE BEHAVIOR, DISCIPLINE AND CONSEQUENCES.
- M. J. The procedure, including notification of parents or guardians, for handling children's illnesses, accidents, and injuries.

 FOR NOTIFICATION OF PARENTS OR GUARDIANS AND FOR HANDLING CHILDREN'S ILLNESSES, ACCIDENTS, INJURIES, OTHER EMERGENCIES.

- N. NOTIFICATION OF REPORTABLE COMMUNICABLE DISEASES TO THE CDPHE OR LOCAL HEALTH DEPARTMENT AND PARENT NOTIFICATION OF OTHER CONTAGIOUS CONDITIONS MANAGED THROUGH CONSULTATION WITH THEIR NURSE CONSULTANT.
- O. SPECIFIC CIRCUMSTANCES AND SYMPTOMS FOR NOT ADMITTING ILL CHILDREN AND CONDITIONS FOR RE-ADMITTANCE.
- K. The procedures for responding to emergencies such as lost children, tornadoes, and fires.
- P. EMERGENCY RESPONSE PROCEDURES THAT EXPLAIN, AT A MINIMUM, THE LIFE SAVING PROCEDURE THAT WILL BE FOLLOWED, AND HOW THE CENTER WILL FUNCTION DURING A FIRE, SEVERE WEATHER, LOCKDOWN, REVERSE EVACUATION, OR SHELTER-IN-PLACE EMERGENCY SITUATION.
- Q. EMERGENCY RESPONSE PROCEDURES THAT EXPLAIN AT A MINIMUM HOW A LOST CHILD EMERGENCY WILL BE HANDELED BOTH AT THE CENTER OR WHEN AWAY FROM THE CENTER ON AN EXCURSION AND WHEN AUTHORITIES AND PARENTS WILL BE NOTIFIED.
- R. L. The procedure for transporting children, if applicable, including transportation arrangements/METHOD OF TRANSPORTATION, WRITTEN PARENTAL AUTHORIZATION and parental permission—for excursions and related activities, SEATING, CHILD RESTRAINT SYSTEMS AND SUPERVISION. CAR RESTRAINTS ARE USED IN ACCORDANCE WITH STATE LAW REQUIREMENTS.
- S. M. The written policy and procedure governing field trips, television and video viewing, and special activities, including the staff's responsibility for the supervision of children.
- T. EQUIPMENT AND SUPPLIES PARENTS ARE TO PROVIDE FOR THEIR CHILD.
- U. WRITTEN AUTHORIZATION OR DENIAL FOR MEDIA USE INCLUDING, BUT NOT LIMITED TO, TELEVISION SHOWS, VIDEO, MUSIC, SOFTWARE USED AT THE FACILITY AND TIME LIMITS FOR ALL MEDIA USE.
- V. N. The policy on children's safety related to riding in a vehicle, seating, supervision, and emergency procedures on the road.
- W. REST TIME AND EQUIPMENT.
- X. PROVISION OF DAILY OUTSIDE PLAY TIME.
- Y. O. The procedure for releasing children from the center only to persons for whom the center has written authorization.

 AUTHORIZATION OF PARENTS OR OTHER DESIGNEES TO PICK UP CHILDREN, INCLUDING THE POLICY FOR HOW THE PROVIDER WILL RESPOND TO INDIVIDUALS NOT AUTHORIZED BY PARENTS/GUARDIANS TO PICK UP A CHILD AND IF A PARENT OR OTHER PERSON/S ARRIVES UNDER THE INFLUENCE OF DRUGS AND OR ALCOHOL.
- P. The procedures followed when a child is picked up from the center after the center is closed or not picked up at all, and to ensure that all children are picked up before the staff leave for the day.

- Z. PROCEDURE FOR MANAGING A SITUATION WHERE CHILDREN REMAIN AFTER THE SCHEDULED CLOSURE OF THE FACILITY AND THE PARENT, GUARDIAN OR OTHER EMERGENCY CONTACTS CANNOT BE REACHED. THIS SHALL INCLUDE NOTIFICATION OF THE LOCAL COUNTY DEPARTMENT OF SOCIAL SERVICES OR POLICE, IF NECESSARY.
- Q. The procedure for caring for children who arrive late to the center and their class/group is away from the center on a field trip or excursion.
- AA. R. The procedure for storing and administering children's medicines and delegation of medication administration in compliance with Section 12-38-132, C.R.S., of the "Nurse Practice Act".

 STORING, ADMINISTERING, RECORDING AND DISPOSING OF CHILDREN'S MEDICINES IN COMPLIANCE WITH THE STATE DEPARTMENT APPROVED MEDICATION ADMINISTRATION COURSE.
- BB. ACCEPTANCE OF AND POTENTIAL PRESENCE OF NON-IMMUNIZED CHILDREN IN EARLY CARE AND EDUCATION PROGRAMS.
- CC. USE OF AND HOW OFTEN SUNSCREEN IS APPLIED, INCLUDING AUTHORIZATION FOR USE OF SUNSCREEN, AND HOW INFANTS ARE PROTECTED FROM SUN EXPOSURE WITHOUT THE USE OF SUNSCREEN.
- DD. PROTECTION OF CHILDREN FROM EXPOSURE TO SECOND (2ND) HAND SMOKE.
- EE.S. The procedure concerning children's ALLOWABLE personal belongings and money OF CHILDREN OR PARENTS INCLUDING STORAGE, LOSS, DAMAGE OR THEFT OF CENTERS OR CHILD'S PERSONAL BELONGINGS.
- FF. HOW AND BY WHOM CHILDREN ARE SUPPLIED WITH APPROPRIATE CLOTHING AND EQUIPMENT NECESSARY TO PARTICIPATE IN INDOOR AND OUTDOOR ACTIVITIES, INCLUDING HELMETS, WRIST PROTECTION, AND KNEE AND ELBOW PADS WHEN RIDING A SCOOTER, BICYCLE, SKATEBOARD OR ROLLERBLADES.
- T.. The policy concerning meals and snacks.
- GG. MEALS, SNACKS, AND PARENTAL NOTIFICATION OF MENUS

 1. HOW CHILDREN WITH FOOD ALLERGIES ARE ACCOMODATED.

 2. THE PROVISION OF SOLID FOODS FOR INFANTS AND TODDLERS TO ENSURE THEIR NUTRITIONAL INTAKE IS ADEQUATE.
- HH. POLICY ON TRANSITIONING A CHILD FROM EITHER BREAST FEEDING TO A BOTTLE AND/OR CUP, OR FROM A BOTTLE TO A CUP.
- U. The policy on diapering and toilet training.
- II. DIAPERING AND TOILET TRAINING, INCLUDING, BUT NOT LIMITED TO, PROCESS, COMMUNICATION, TIME FRAMES, SUPPLIES, AND EXPECTATION.
- JJ.V. The policy regarding visitors to the center.
- W. The policy on parent and staff conferences to inform the parents or guardians of the child's behavior, progress, and social and physical needs.

- X. The procedure for filing a complaint about child care (see 7.701.5, General Rules for Child Care Facilities).
- KK. FILING A COMPLAINT ABOUT A CHILD CARE CENTER, INCLUDING THE NAME, ADDRESS AND TELEPHONE NUMBER OF THE COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF CHILD CARE, WHERE A COMPLAINT MAY BE FILED.
- Y. The policy regarding the reporting of child abuse (see 7.701.5, General Rules for Child Care Facilities).
- LL. REPORTING OF CHILD ABUSE, INCLUDING THE NAME OF THE COUNTY DEPARTMENT OF SOCIAL/HUMAN SERVICES AND PHONE NUMBER OF WHERE A CHILD ABUSE REPORT SHOULD BE MADE.
- MM. WHERE A PARENT MAY OBTAIN THE OFFICIAL RULES REGULATING CHILD CARE CENTERS, INCLUDING THE SECRETARY OF STATE'S WEBSITE.
- NN. REGULARLY IDENTIFYING ON A ROUTINE BASIS RECALLED TOYS, EQUIPMENT AND FURNISHINGS AND DEVELOPING A PLAN TO REMOVE THE RECALLED ITEMS FROM THE CENTER.
- OO. NOTIFY PARENTS IN WRITING OF ANY SIGNIFICANT CHANGES TO SERVICES, POLICIES, PROCEDURES AND FEES.
- PP. NOTIFY PARENTS OF STAFFING CHANGES.
- Z. The policy regarding notification when child care service is withdrawn and when parents or quardians withdraw their children from the center.
- QQ. THE POLICY REGARDING HOW DECISIONS ARE MADE REGARDING WITHDRAWAL FROM CHILD CARE
 - 1. STEPS THE PROGRAM TAKES PRIOR TO WITHDRAWAL
 - 2. POLICY REGARDING NOTIFICATION WHEN CHILD CARE SERVICES ARE WITHDRAWN
 - 3. WHEN PARENTS OR GUARDIANS WITHDRAW THEIR CHILDREN FROM THE CENTER.
- RR. PARENT/GUARDIAN ACCESSIBILITY TO THEIR CHILDREN ANYTIME THEY ARE IN CARE AND TO AREAS USED FOR CARE.
- SS. THE POLICY REGARDING PARENTS AND STAFF SHARING INFORMATION RELATED TO CHILD'S HEALTH, SAFETY AND DEVELOPMENT, INCLUDING BUT NOT LIMITED TO SPECIAL DIETS, ACCIDENT REPORTS, SPECIFIC FEARS, ALLERGIES AND INFORMATION RECEIVED FROM THE NURSE CONSULTANT.
- TT. THE POLICY FOR PARENTAL PARTICIPATION IN THE PROGRAM AND HOW FEEDBACK IS GIVEN.
- UU. THE POLICY REGARDING PARTICIPATION EXPECTATIONS FOR PARENT TEACHER CONFERENCES.

- VV. THE CENTER SHALL HAVE A PLAN TO ACCOMMODATE A CHILD WITH KNOWN ALLERGIES AND SENSITIVITES. THE CENTER SHALL LIMIT EXPOSURE TO KNOWN ENVIRONMENTAL ALLERGIES AND SENSITIVITES.
- WW. THE POLICY ALLOWING A SCHOOL AGE CHILD TO SELF CARRY AN INHALER AND/OR EPINEPHREN INCLUDING THE RESPONSIBILITY FOR THE CHILD, PARENTS AND STAFF FOR THE SAFE USE AND STORAGE.

7.702.42 Communication, Emergency, and Security Procedures

Rev. eff. 11/1/01

(See also Sections 7.702.41, A, and 7.702.62, B)

- A. The center must SHALL notify the parents or guardians in writing of significant changes in its services, policies, or procedures so that they can decide whether the center continues to meet the needs of the child.
- B. For security purposes, a sign-in/sign-out sheet or other mechanism for parents and guardians must be maintained daily by the center. It must include, for each child in care, the date, the child's name, the time when the child arrived at and left the center, and the parent or guardian's signature or other identifier. THE CENTER SHALL MAINTAIN A DAILY SIGN IN/OUT METHOD CONTAINING THE DATE, THE CHILD'S NAME, THE TIME THAT THE CHILD ARRIVED AT AND LEFT THE CENTER, AND THE PARENT, GUARDIAN, OR AUTHORIZED PERSON'S SIGNATURE. A FULL SIGNATURE OR OTHER APPROVED METHOD IS REQUIRED BY THE PARENT OR GUARDIAN EVERY TIME THE CHILD ARRIVES AT OR LEAVES THE CENTER. DESIGNATED CENTER STAFF SHALL SIGN IN OR OUT CHILDREN WHO ARRIVE DIRECTLY FROM SCHOOL OR AN ACTIVITY AS NEEDED ON A DAILY BASIS. DESIGNATED CENTER STAFF SHALL USE THEIR FULL SIGNATURE OR OTHER APPROVED METHOD. IF CENTER STAFF DO NOT HAVE WRITTEN AUTHORIZATION TO SIGNS THE CHILD IN OR OUT, THE PARENT/GUARDIAN SHALL PROVIDE A SIGNATURE ON A WEEKLY BASIS TO VERIFY THE RECORD.
- C. The center must have a working telephone with the a public phone number available to the public. Emergency telephone numbers of the following must be posted near the telephone: a 911 notice, where 911 is available, or rescue unit if 911 isn't available; a hospital or emergency medical clinic; the local fire, police, and health departments; and Rocky Mountain Poison Control. The telephone must be available to staff at all times that the center is in operation.
 A WORKING TELEPHONE SHALL BE ON THE PREMISES IN THE GENERAL AREA OF THE OFFICE.
 - THE TELEPHONE NUMBER SHALL BE MADE AVAILABLE TO EACH PARENT AND THE LICENSING AUTHORITY.
 - 3. THE FOLLOWING EMERGENCY TELEPHONE NUMBERS SHALL BE POSTED NEAR THE TELEPHONE:
 - A. 911 OR THE ALTERNATE EMERGENCY NUMBER FOR LOCAL FIRE OR POLICE; AND,
 - B. NAME, PHONE NUMBER AND PHYSICAL ADDRESS OF THE CHILD CARE CENTER; AND,
 - C. HOSPITAL OR EMERGENCY MEDICAL CLINIC; AND,

- D. LOCAL HEALTH DEPARTMENT; AND,
- E. ROCKY MOUNTAIN POISON CENTER NUMBER AT 1-800-222-1222; AND,
- F. LOCATION OF CHILDREN'S PERSONAL EMERGENCY NUMBERS.
- 4. THE TELEPHONE AND ALTERNATIVE EMERGENCY TELEPHONE NUMBERS FOR PARENT(S) OR GUARDIAN(S) AND OTHER AUTHORIZED EMERGENCY CONTACTS OF EACH CHILD IN CARE SHALL BE ACCESSIBLE IN ONE DESIGNATED PLACE.
- 5. IF 911 IS NOT AVAILABLE, THERE SHALL BE A PLAN IN PLACE FOR ACCESSING EMERGENCY TRANSPORTATION AT ALL TIMES.
- 6. PARENT(S) OR GUARDIAN(S) SHALL BE NOTIFIED WHEN ACCIDENTS, INJURIES, OR ILLNESSES OCCUR.
- D. The center must be able to provide emergency transportation to a health care facility at all times.
- E.D. The director of the center or the director's delegated substitute must SHALL have a means for determining at all times who is present at the center.
- F.E. A written policy regarding visitors to the center must SHALL be posted and a record maintained daily by the center that includes at a minimum the visitor's name and address and the purpose of the visit. At least one (1) piece of identification must SHALL be inspected for individuals who are strangers to personnel at the center.
- G.F. The center must release the child only to the adult(s) for whom written authorization has been given and is maintained in the child's record (see 7.702.101). In an emergency, the child may also be released to an adult for whom the child's parent or guardian has given verbal authorization. If the staff member who releases the child does not know the adult, identification must be required to assure that the adult is authorized to pick up the child. THE CENTER SHALL RELEASE THE CHILD ONLY TO THE PERSON(S) TO PARENT GIVEN WHOM THE OR GUARDIAN HAS WRITTEN AUTHORIZATION. WRITTEN AUTHORIZATION SHALL BE MAINTAINED IN THE CHILD'S RECORD. IN AN URGENT AND/OR EMERGENCY SITUATION. THE CHILD MAY BE RELEASED TO A PERSON FOR WHOM THE CHILD'S PARENT OR GUARDIAN HAS GIVEN VERBAL AUTHORIZATION. IF THE PROVIDER WHO RELEASES THE CHILD DOES NOT KNOW THE PERSON. PICTURE IDENTIFICATION SHALL BE REQUIRED TO ASSURE THAT THE PERSON IS AUTHORIZED TO PICK-UP THE CHILD.
- H.G. The center-must have a procedure for dealing with individuals not authorized by the parent or guardian of a child who attempts to have the child released to them. SHALL HAVE A WRITTEN POLICY DEALING WITH INDIVIDUALS NOT AUTHORIZED BY PARENTS/GUARDIANS WHO ATTEMPT TO TAKE A CHILD FROM THE FACILITY.
- I.H. The center must have a written emergency procedure that explains, at a minimum, how the center will be evacuated in case of fire or other disaster requiring evacuation, how to function during a tornado alert, and the reporting of

reportable communicable illnesses to the local health department pursuant to regulations of the State Department of Public Health and Environment.

SHALL HAVE WRITTEN EMERGENCY RESPONSE AND DRILL PROCEDURES.

ALL DRILLS SHALL BE HELD AT VARYING TIMES AND ALL ADULTS AND CHILDREN PRESENT IN THE CENTER SHALL PARTICIPATE IN THE DRILLS. FIRE DRILLS SHALL BE CONDUCTED MONTHLY. EACH OF THE FOLLOWING DRILLS SHALL BE HELD A MINIMUM OF TWO (2) TIMES PER YEAR:

- 1. SEVERE WEATHER; AND,
- 2. LOCKDOWN; AND,
- REVERSE EVACUATION; AND,
- SHELTER-IN-PLACE.
- J.I. The center must SHALL have a written procedure for closing the center at the end of the day to ensure that all children are picked up.
- J. EMERGENCY INFORMATION FOR EACH CHILD SHALL BE KEPT IMMEDIATELY AVAILABLE AND SHALL INCLUDE CHILD'S NAME, ADDRESS, PARENT NAMES, PHONE NUMBERS, AND EMERGENCY AUTHORIZATIONS.
- 7.702.43 Personnel AND STAFF Policies, Orientation, and Staff Development AND REQUIREMENTS
- Rev. eff. A. The duties and responsibilities of each AND ALL staff positionS and the lines of authority and responsibility within the center must SHALL be MAINTAINED AND in writing AT THE FACILITY.
 - B. THE FACILITY SHALL HAVE A WRITTEN POLICY FOR PRE-EMPLOYMENT AND ONGOING HEALTH REQUIREMENTS FOR EMPLOYEES.
 - BC. At the time of employment, staff members must SHALL be informed of their duties AND RESPONSIBILITIES BOTH VERBALLY AND IN WRITING, and BE assigned a supervisor.
 - CD. Prior to working with children, the staff member must SHALL read and be instructed about the FACILITY policies and procedures of the center, including those related to hygiene, sanitation, food preparation practices, proper supervision of children, and reporting of child abuse. Staff members must SHALL sign a statement indicating that they have read and understand the center's policies and procedures.
 - DE. The child care center must SHALL ensure that all staff are familiar with the licensing rules governing child care centers within NINETY (90) days of employment at the center.
 - E. The center must have a staff development plan that includes a minimum of fifteen (15) clock hours of training each year for all staff. The training must relate to one or more of the following areas—child growth and development, healthy and safe environment, developmentally appropriate practices, guidance, family relationships, cultural and individual diversity, and professionalism.

- G. The fifteen (15) clock hours of training not include recertification in First Aid and CPR.
- F. All staff must complete at least 1½ hours of training in universal precautions within 3 months/90 of employment at the center and at least every 3 years thereafter. Renewal of universal precautions training may be part of the first-aid training.
- G.L. If volunteers are used by the center, there must SHALL be a clearly established policy in regard to their function, orientation, and supervision. See also Section 7.702.54, D.
- LM. EFFORTS SHALL BE MADE TO PROVIDE CAREGIVERS TIME AWAY FROM JOB RESPONSIBILITIES.
- MN. WITHIN THIRTY (30) DAYS OF TERMINATION, STAFF MEMBERS SHALL BE PROVIDED A LETTER VERIFYING THEIR EXPERIENCE AT THE CENTER. THE LETTER SHALL CONTAIN THE CENTER'S ADDRESS, PHONE NUMBER AND LICENSE NUMBER, THE EMPLOYEE'S DATE OF HIRE AND TERMINATION, NUMBER OF HOURS WORKED PER WEEK, TOTAL NUMBER OF HOURS WORKED DURING PERIOD OF EMPLOYMENT, THE AGES OF CHILDREN CARED FOR AND THE SIZE OF GROUP THE STAFF MEMBER DIRECTLY WORKED WITH. THE LETTER SHALL BE SIGNED BY A DIRECTOR, OWNER OR HUMAN RESOURCES AGENT OF THE FACILITY OR GOVERNING BODY.
- O. LARGE CENTER DIRECTORS SHALL HAVE A DIRECTOR QUALIFICATION LETTER ISSUED BY THE DEPARTMENT PRIOR TO WORKING AS THE DIRECTOR OF A LARGE CENTER.
- P. TIME LIMITED DIRECTOR LETTERS MUST BE RENEWED PRIOR TO THE EXPIRATION OR THE LETTER SHALL BECOME VOID AND THIS PERSON NO LONGER QUALIFIES AS A LARGE CENTER DIRECTOR.
- Q. AT THE TIME OF RENEWAL FOR A DIRECTOR LETTER, EDUCATION AND EXPERIENCE SHALL BE VERIFIED TO INSURE QUALIFICATIONS ARE MET.
- R. RENEWAL LETTERS FOR A DIRECTOR WILL NOT BE RENEWED FOR DIRECTORS WHO HAVE PROVIDED FALSE INFORMATION TO THE DEPARTMENT, SUCH AS BUT NOT LIMITED TO: FALSE TRANSCRIPTS OR LETTERS OF EXPERIENCE; OR WHO HAVE BEEN FOUNDED FOR CHILD ABUSE, DEEMED CULPABLE IN AN ADVERSE LICENSING CASE OR WHO EXHIBITS UNETHICAL BEHAVIOR THAT MAY CAUSE HARM TO CHILDREN.
- S. PERSONS DENIED AN ORIGINAL OR RENEWAL OF A DIRECTOR LETTER FOR PROVIDING FALSE INFORMATION, DEEMED CULPABLE IN AN ADVERSE ACTION CASE OR WHO HAS EXHIBITED UNETHICAL BEHAVIOR THAT MAY CAUSE HARM TO CHIDREN MAY SUBMIT A NEW APPLICATION FOR CONSIDERATION AFTER A PERIOD OF TWO (2) YEARS FROM THE DATE OF DENIAL.
- T. PERSONS DENIED AN ORIGINAL OR RENEWAL OF A DIRECTOR LETTER MAY FILE AN APPEAL AS PER 7.713.A GENERAL REGULATIONS.

7.702.5 PERSONNEL

- 7.702.51 General Requirements for All Personnel/STAFF POLICIES, ORIENTATION, AND DEVELOPMENT REQUIREMENTS
- Rev. eff. A. All personnel at the center must SHALL demonstrate an interest in and knowledge of children and concern for their proper care and well-being.
 - B. DIRECTORS, EARLY CHILDHOOD TEACHERS AND ALL OTHER PERSONS DIRECTLY RESPONSIBLE FOR THE CARE AND WELFARE OF CHILDREN SERVED MUST BE SUITABLE, OF GOOD CHARACTER AND INTERESTED IN THE BEST INTEREST OF THE CHILDREN.
 - C. ALL PERSONNEL SHALL REFRAIN FROM CONDUCT THAT WOULD ENDANGER THE SAFETY OR WELL BEING OF CHILDREN.
 - B.D. The center/DIRECTOR OR GOVERNING BODY OR DESIGNATED STAFF must SHALL determine if any staff person who works at the center has ever been convicted of a crime as found at Section 7.701, D, 5 or 6 of the General Rules for Child Care Facilities.
 - EC. A criminal record check request must be submitted to the Colorado Bureau of Investigation within 5 days that an individual is employed by the center. The personnel file of each staff member of the center must contain clearance or arrest report from the Colorado Bureau of Investigation, resulting from the staff member's criminal record check. The requirement for a criminal record check is found in Section 7.701.33 of the General Rules for Child Care Facilities.
 - FD. A request for a review of the State Department's automated system must be made within 10 5 working days of each staff member's first day of employment. the method for making the request is found in Section 7.701.32 of the General Rules for Child Care Facilities.
 - E. Staff members must be current for all immunizations routinely recommended for adults by their health care provider.
 - F. All staff members must submit to the center a medical statement, signed and dated by a licensed physician or other health care professional, verifying that they are in good mental, physical, and emotional health appropriate for the position for which they have been hired. This statement must be dated no more than 6 months prior to employment or within 30 days after the date of employment. This statement must indicate when subsequent medical statements are required.

Subsequent medical statements must be submitted as required in writing by a physician or other health care professional.

- G. If, in the opinion of a physician or mental health practitioner, an employee's examination or test results indicate a physical, emotional, or mental condition that could be hazardous to a child, other staff, or self, or that would prevent satisfactory performance of duties must not be assigned or returned to a position until the condition is cleared to the satisfaction of the examining physician.
- G. ALL STAFF SHALL COMPLETE A MINIMUM OF FIFTEEN (15) CLOCK HOURS OF TRAINING EACH YEAR BEGINNING WITH THE DATE OF HIRE TO THE CENTER. AT LEAST THREE (3) HOURS PER YEAR SHALL BE IN THE AREA OF SOCIAL EMOTIONAL DEVELOPMENT. ONGOING TRAINING SHALL DEMONSTRATE A DIRECT CONNECTION TO ONE OR MORE OF THE FOLLOWING CORE KNOWLEDGE AREAS:

- CHILD GROWTH AND DEVELOPMENT:
- 2. HEALTH, NUTRITION AND SAFETY;
- DEVELOPMENTALLY EFFECTIVE PRACTICES;
- 4. GUIDANCE:
- 5. FAMILY AND COMMUNITY RELATIONSHIPS:
- 6. CULTURAL AND INDIVIDUAL DIVERSITY;
- 7. PROFESSIONALISM;
- 8. ADMINISTRATION AND SUPERVISION;
- 9. SOCIAL EMOTIONAL DEVELOPMENT
- H. THE FIFTEEN (15) CLOCK HOURS OF TRAINING DOES NOT INCLUDE RECERTIFICATION IN FIRST AID AND CPR. AN ORIGINAL CERTIFICATION OF CPR AND FIRST (1ST) AIDE SHALL BE COUNTED TOWARDS A STAFF MEMBER'S ONGOING TRAINING ONE TIME DURING EMPLOYMENT.
- I. TO BE COUNTED FOR ONGOING TRAINING, A PROVIDER SHALL RECEIVE A CERTIFICATE FOR EACH TRAINING THAT INCLUDES:
 - 1. THE TITLE OF THE TRAINING: AND
 - THE CORE KNOWLEDGE AREA; AND
 - 3. THE DATE AND CLOCK HOURS OF THE TRAINING: AND
 - 4. THE NAME AND SIGNATURE OF THE TRAINER, OR ANOTHER APPROVED METHOD OF VERIFYING THE NAME AND QUALIFICATIONS OF THE TRAINER.
 - EXPIRATION OF TRAINING IF APPLICABLE
- J. THE TRAINER SHALL HAVE DOCUMENTATION OF THE QUALIFICATIONS FOR EACH TOPIC OF TRAINING CONDUCTED WHICH SHALL BE AVAILABLE FOR REVIEW BY REPRESENTATIVES OF THE STATE DEPARTMENT.
- K. ALL STAFF SHALL COMPLETE A STANDARD PRECAUTIONS (FORMALLY UNIVERSAL PRECAUTIONS) TRAINING BEFORE WORKING WITH CHILDREN. THIS TRAINING SHALL BE TAUGHT BY SOMEONE KNOWLEDGEABLE IN THE SUBJECT MATTER COVERED BY THE TRAINING PROGRAM AS IT RELATES TO THE FACILITY AND SHALL INCLUDE A REVIEW OF THE FACILITY SPECIFIC EXPOSURE CONTROL PLAN. THERE SHALL ALSO BE AN OPPORTUNITY FOR INTERACTIVE QUESTIONS AND ANSWERS WITH THE PERSON CONDUCTING THE TRAINING. THIS TRAINING SHALL BE REVIEWED YEARLY AND DOCUMENTATION OF THE INITIAL TRAINING AND OF EACH ANNUAL REVIEW SHALL BE KEPT FOR EVERY EMPLOYEE.
- L. STAFF RESPONSIBLE FOR COLLECTION, REVIEW AND MAINTENANCE OF THE CHILD IMMUNIZATION RECORDS SHALL COMPLETE THE CDPHE IMMUNIZATION COURSE YEARLY.

7.702.52 Director Qualifications - Large Child Care Center [Rev. eff. 5/1/10]

- A. The educational requirements for the director of a large center must SHALL be met by haveING OBTAINED A HIGH SCHOOL DIPLOMA OR GED, AND satisfactory completion of one of the following. (All course hours are given in semester CREDIT hours, but equivalent quarter hours are acceptable.) Official college transcripts must SHALL be submitted to the Department for evaluation of qualifications.
 - 1. All individuals with a Bachelor's or Master's degree with major emphasis in child development, early childhood education, or early childhood special education and all other individuals submitting official transcripts for evaluation and/or completing necessary college coursework to become qualified as a director of a large center must SHALL complete a three (3) semester CREDIT hour course from a regionally accredited college

or university, at either a two year, four year or graduate level, in each of the following subject or content areas:

- a. Introduction to early childhood professions;
- b. Introduction to early childhood lab techniques;
- c. Early childhood guidance strategies for children;
- d. Early childhood health, nutrition, and safety;
- e. Administration of early childhood care and education programs;
- f. Administration: human relations for early childhood professions or introduction to business;
- g. Early childhood curriculum development;
- h. Early childhood growth and development.

Effective May 31, 2012, the following two (2) three (3) semester CREDIT hour college courses, in addition to the courses listed in Section 7.702.52, A, 1, must SHALL be taken from a regionally accredited college or university at either a two year, four year or graduate level, in each of the following subject or content areas for a total of thirty (30) semester hours:

- a. The exceptional child;
- b. Infant/toddler theory and practice; or the Department approved expanding quality infant/toddler training.
- 2. Completion of a course of training approved by the State Department that includes course content listed at Section 7.702.52, A, 7, and experience listed at Section 7.702.52, B.
- 3. Completion of the Advanced Credential Assessment (formerly called the Challenge Test) through the Colorado Office of Professional Development with a score of eighty percent or better; in addition, experience listed at Section 7.702.52, B, is required.
- B. All individuals holding a valid approval letter for director qualifications from the Department of Human Services that matches official Department records are required to take, or have taken, the following five (5) three (3) semester CREDIT hour courses.
 - 1. One course must SHALL be taken every two (2) years from a regionally accredited college or university at either a two year, four year or graduate level, in each of the following subject or content areas:
 - a. Early childhood guidance strategies;
 - b. Early childhood health, nutrition and safety or child nutrition;
 - c. The exceptional child:
 - d. Infant/toddler theory and practice; or expanding quality in infant and toddler training;
 - e. Administration: human relations for early childhood professions.
 - 2. Official transcripts from a regionally accredited college or university of the one (1) or more of the five (5) courses shall be submitted to the State Department within thirty days of completing each course until all five (5) courses have been completed. The first course must SHALL be completed by May 31, 2012.

Directors of public school preschools must SHALL attend a Department-approved course of training in nutrition and implementation of rules regulating child care.

- 3. All college course grades for large or small child care center director qualification must SHALL be a "C" or better.
- C. The experience requirements for the director of a large center must SHALL be met by completion of the following amount of work experience in a child development program, which includes working with a group of children in such programs as a preschool, child care center, kindergarten, or Head Start program:
 - 1. Persons with Bachelor's or Master's degrees with a major emphasis in child development, early childhood education, or early childhood special education, no additional experience is required.
 - 2. Persons with a TWO (2)-year college degree in early childhood education must SHALL have twelve (12) months (1,820 hours) of verified experience working directly with children in a child development program.
 - 3. Persons with a Bachelor's degree and completion of courses specified in Section 7.702.52, A, 1-2, must SHALL have twelve (12) months (1,820 hours) of verified experience working directly with children in a child development program.

- 4. Persons who have no degree but have completed the twenty-four (24) semester CREDIT hours specified in Section 7.702.52, A, 1-2, must SHALL have twenty-four (24) months (3,640 hours) of verified experience working directly with children in a child development program.
- 5. Verified experience acquired in a licensed family child care home or school-age child care center may count for up to half of the required experience for director qualifications. To have family child care home experience considered, the applicant must SHALL be or have been the licensee. The other half of the required experience must SHALL be working directly with children in a child development program.
- 6. Experience with five (5) year olds must SHALL be verified as follows:
 - a. If experience caring for five year old children occurs in a child care center classroom, the hours worked shall be counted as preschool experience;b. If experience caring for five year old children occurs in an elementary school program, the hours worked shall be counted as school-age experience.
- D. At all times, every large child care center must SHALL have a substitute director that meets all of the requirements for director as listed at Section 7.702.52, A, 1 or 7.702.52, A, 2. When the director of the large child care center cannot be present sixty percent (60%) of any day the center is in operation, the equally qualified substitute director must SHALL substitute for the director. In an emergency situation, when the equally qualified director substitute cannot be present, an individual that does not meet all of the director educational and experience requirements may substitute for the director for a maximum of two (2) weeks per calendar year if they meet one or more of the following requirements:
 - 1. At least one year of experience as an early childhood teacher at the center.
 - 2. A Bachelor of Arts or Bachelor of Science in the human services field.
 - 3. Qualification as an early childhood teacher and completion of at least half of the required coursework for director qualifications including the two (2) administration classes; administration of early childhood care and education programs and administration; human relations for early childhood professions.
- E. IN ADDITION TO ANNUAL ONGOING TRAINING OF 15 HOURS EACH YEAR, DIRECTORS THAT HAVE MET ALL LARGE CENTER DIRECTOR REQUIREMENTS OF FULL DAY CHILD CARE CENTERS OPERATING MORE THAN 6 HOURS A DAY MUST COMPLETE A 3 CREDIT HOUR COURSE EVERY 5 YEARS IN A SUBJECT RELATED TO THE OPERATION OF A CHILD CARE CENTER. (PLEASE NOTE: THIS RULE WAS TEMPORARILY REMOVED SO DIRECTORS CAN HAVE TIME TO COMPLETE NEWLY REQUIRED COURSEWORK BY MAY OF 2012.)
- F.

 E. Whenever the director of a drop-in child care center cannot be present fifty percent (50%) of any day the center is in operation, a substitute that meets one of the following qualifications must SHALL be present:
 - 1. At least one (1) year of experience as a qualified early childhood teacher at the drop-in child care center:
 - 2. EIGHTEEN (18) months experience as a qualified early childhood teacher with children under 12 years of age and at least six (6) months experience at the drop-in child care center;
 - 3. A Bachelor of Arts or Bachelor of Science degree from an accredited college or university in the human services field; or,
 - 4. Qualification as an early childhood teacher and completion of at least half of the required coursework for director qualifications, including one of the administration classes.

7.702.53 Director Qualifications - Small Child Care Center [Rev. eff. 5/1/10]

- A. The director or substitute director of a small center must SHALL have OBTAINED A HIGH SCHOOL DIPLOMA OR GED, AND completed one of the following:
 - 1. Three (3) years' satisfactory experience in the group care of children under six (6) years of age (5460 hours) and at least two (2) 3-semester CREDIT hours from a

regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas in early childhood education; one of the courses must SHALL be either introduction to early childhood education or guidance strategies; or,

- 2. Two (2) years college education (sixty (60) semester CREDIT hours at a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas with at least two (2) 3-semester CREDIT hour courses in early childhood education; one of which must SHALL be either introduction to early childhood education or guidance strategies; and one (1) year (1820 hours) of satisfactory experience in the group care of children under six (6) years of age; or, 3. Current certification as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or other Department-approved credential; or,
- 4. A two (2) year college degree in child development or early childhood education from a regionally accredited college or university, at either a two (2) year, four (4) year or graduate level, in each of the following subject or content areas that must SHALL include at least one (1) THREE 3-semester CREDIT hour course in either introduction to early childhood education or guidance strategies and six (6) months (910 hours) satisfactory experiencE in the group care of children under six (6) years of age.
- B. Satisfactory experience includes all options listed at Section 7.702.52, A, 5.

7.702.54 Qualifications for Other Staff Members [Rev. eff. 5/1/10]

- A. Early Childhood Teacher
 - 1. An early childhood teacher, assigned responsibility for a single group of children and working under the supervision of a director, must SHALL be at least eighteen (18) years of age, SHALL HAVE OBTAINED A HIGH SCHOOL DIPLOMA OR GED and must SHALL meet at least one of the following qualifications:
 - a. A Bachelor's degree from a regionally accredited college or university. Effective May 31, 2010, the major area of study for each Bachelor's degree shall be in one of the following areas:
 - 1) Early childhood education;
 - 2) Elementary education;
 - 3) Special education;
 - 4) Family and child development:
 - 5) Child psychology; OR,
 - b. Effective May 31, 2011, a Bachelor's degree from a regionally accredited college or university with a major area of study in any area other than those listed at Section 7.702.54, A, 1, a, must SHALL have two (2) three (3) -semester CREDIT hour early childhood education college courses with one course being either introduction to early childhood education or guidance strategies, and at least six (6) months (910 hours) of satisfactory experience; OR,
 - c. A TWO (2)-year college degree, sixty (60) semester CREDIT hours, in early childhood education from a regionally accredited college or university, which must-SHALL include at least two (2) three (3) -semester CREDIT hour courses, one of which must SHALL be either introduction to early childhood education or guidance strategies; and at least six (6) months (910 hours) of satisfactory experience; OR,
 - d. Completion of two (2) years of college education, sixty (60) semester CREDIT hours, from a regionally accredited college or university with at least one (1) three (3) -semester CREDIT hour college course in early childhood education, plus six (6) months (910 hours) of verified experience in the care and supervision of four (4) or more children under six (6) years of age who are not related to the individual. This option to be early childhood teacher qualified will not be available after May 31, 2011; OR,
 - e. Completion of twelve (12) semester CREDIT hours from a regionally accredited college or university, at either a two (2) year, four (4) year or graduate level, in each of the following subject or content areas in early childhood education. By May 31, 2012, one (1) of the three (3) semester CREDIT hour

courses must SHALL be either introduction to early childhood education or guidance strategies, plus nine (9) months (1,395 hours) of verified experience in the care and supervision of four (4) or more children under six (6) years of age who are not related to the individual; OR,

- f. Completion of a vocational or occupational education sequence in child growth and development plus twelve (12) months (1,820 hours) of verified experience in the care and supervision of four (4) or more children under six (6) years of age who are not related to the individual; OR,
- g. Current certification as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or other Department-approved credential. h. Completion of a course of training approved by the Department that includes training and work experience with children in a child growth and development program plus twelve (12) months (1,820 hours) of verified experience in the care and supervision of four (4) or more children under six (6) years of age who are not related to the individual: OR,
- i. Thirty-six (36) months (5,460 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual. This option to be qualified as an early childhood teacher will not be available after May 1, 2010.
- i j. Twenty-four (24) months (3,640 hours) of verified experience in the care and supervision of four (4) or more children under six (6) years of age who are not related to the individual plus either:
 - 1) A current Colorado Level I credential; or,
 - 2) Two (2) three-semester CREDIT hour early childhood education college courses from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas with one course being either introduction to early childhood education or guidance strategies.
- 2. Verified experience in the care and supervision of four (4) or more children under six (6) years of age who are not related to the individual. Satisfactory experience includes being a licensee of a family child care home; a teacher's aide or teacher in a child care center, preschool, or elementary school.
- 3. All college course grades toward early childhood teacher qualifications must SHALL be "C" or better.

B. Kindergarten Teacher

Each teacher of a kindergarten class must SHALL have the same qualifications as a director for a large center (see Section 7.702.52) or be state certified or licensed as an elementary or early childhood teacher.

C. Staff Aide

Staff aides must SHALL be at least SIXTEEN (16) years of age and must SHALL work directly under the supervision of the director or an early childhood teacher. Infant staff aides must SHALL be at least EIGHTEEN (18) years of age.

D. ASSISTANT EARLY CHILDHOOD TEACHER

PERSONS HAVING COMPLETED ONE OF THE EARLY CHILDHOOD EDUCATION COURSES REFERENCED CCR 7.702.54.A.1.j), WITH A COURSE GRADE OF "C" OR BETTER AND TWELVE (12) MONTHS VERIFIED EXPERIENCE IN THE CARE AND SUPERVISION OF FOUR (4) OR MORE CHILDREN LESS THAN SIX (6) YEARS OF AGE, WHO ARE NOT RELATED TO THE INDIVIDUAL. SATISFACTORY EXPERIENCE INCLUDES BEING A LICENSEE OF A FAMILY CHILD CARE HOME; A TEACHERS AIDE OR TEACHER IN A CHILD CARE CENTER, PRESCHOOL OR ELEMENTARY SCHOOL. ASSISTANT EARLY CHILDHOOD TEACHER'S SHALL BE ENROLLED IN AND ATTENDING THE SECOND (2ND) EARLY CHILDHOOD EDUCATION CLASS THAT WILL BE USED AS THE BASIS FOR THEIR QUALIFICATION FOR THE POSITION OF EARLY CHILDHOOD TEACHER; OR

E. PERSONS HAVING COMPLETED TWO (2) OF THE EARLY CHILDHOOD EDUCATION CLASSES REFERENCED IN CCR 7.702.54.A.j, WITH A COURSE GRADE OF "C" OR BETTER AND NO EXPERIENCE.

- F.D. Volunteers(see also Section 7.702.43, G)
 - 1. Volunteers must SHALL have qualifications suitable to the tasks they are assigned.
 - 2. Volunteers must be supervised and given instruction as to the center's policies and procedures.
 - 2. VOLUNTEERS CANNOT BE USED TO MEET STAFF TO CHILD RATIOS.
 - 3. VOLUNTEERS SHALL BE DIRECTLY SUPERVISED BY THE EARLY CHILDHOOD TEACHER OR DIRECTOR AND HAVE CLEARLY ESTABLISHED WRITTEN DUTIES.
 - 4. VOLUNTEERS SHALL BE MADE FAMILIAR WITH THE RULES REGULATING EARLY CARE AND EDUCATION CENTERS AND THE WRITTEN POLICIES AND PROCEDURES OF THE FACILITY PRIOR TO ASSISTING WITH THE CARE OF CHILDREN.
 - 5. ANY ADULT VOLUNTEER EIGHTEEN (18) YEARS OF AGE OR OLDER WHO WORKS MORE THAN FOURTEEN DAYS (ONE HUNDRED TWELVE (112) HOURS) A CALENDAR YEAR SHALL COMPLETE:
 - A. A FINGERPRINT BASED CRIMINAL BACKGROUND RECORD CHECK AS REQUIRED AT SECTION 7.701.33; AND
 - B. THE STATE DEPARTMENT REQUIRED AUTOMATED SYSTEM BACKGROUND CHECK FOR CHILD ABUSE AND NEGLECT AS REQUIRED AT SECTION 7.701.32.
 - C. CONFORMATION THAT THE PERSON'S NAME IS NOT ON THE NATIONAL AND LOCAL SEX OFFENDER REGISTRY.
 - 6. DOCUMENTATION OF THE NUMBER OF HOURS EACH VOLUNTEER WORKS SHALL BE MAINTAINED BY THE CENTER.
 - 7. THE RESULTS OF BACKGROUND CHECKS SHALL BE AVAILABLE FOR REVIEW BY LICENSING AGENTS.
 - 8. THE ONLY TIME A PARENT/GUARDIAN VOLUNTEER CAN BE ALONE WITH A CHILD OTHER THAN THEIR OWN WITHOUT A COMPLETED BACKGROUND CHECK, IS WHILE DRIVING ON A FIELD TRIP (SEE POLICIES).
 - 9. VOLUNTEERS WHO HAVE OBTAINED A CRIMINAL RECORD CHECK AND MOVE TO EMPLOYMENT OR VOLUNTEER SERVICE WITH ANOTHER CHILD CARE FACILITY OPERATED BY A DIFFERENT GOVERNING BODY SHALL FOLLOW THE CRIMINAL RECORD CHECK AND/OR TRANSFER PROCESS APPROVED BY THE DEPARTMENT.

Do volunteers have to be above a certain age? RECOMMENDATIONS???

7.702.55 Required Staff and Supervision [Rev. eff. 5/1/10]

A. Staff-Child Ratios

- 1. At any time when NINE (9) or more children are present at the center, at least TWO (2) adult staff members must SHALL be on duty. When EIGHT (8) or fewer children are present, there must SHALL be at least ONE (1) adult staff member working with the children and a second adult on call and immediately available.
- 2. The director or director substitute of the center must SHALL be present at the center at least SIXTY (60%) percent of any day that the center is open.
- 3. The director or substitute director of an extended hour drop-in child care center operating at least six (6) days per week must SHALL be present at the center or involved in director activities at least fifty percent (50%) of the hours of operation of any day the center is in operation.
 - a. If the director is not on site at the center for a portion of any day the center is in operation, the director must SHALL be available by phone.

- b. The director must SHALL be present in the center at least THIRTY (30) hours each week.
- 4. There must SHALL be assigned at least a qualified group leader EARLY CHILDHOOD TEACHER for SUPERVISING each group of children. A DIRECTOR MAY BE THE TEACHER FOR ONE GROUP OF CHILDREN IF THEY ARE WORKING DIRECTLY WITH THAT GROUP.
- 5. A DIRECTOR MAY BE ASSIGNED TO A CLASSROOM IF THE FOLLOWING REQUIREMENTS ARE MET:
 - A. ADMINISTRATIVE DUTIES
 - B. PARENT/STAFF SUPPORT
- 6. AN ASSISTANT EARLY CHILDHOOD TEACHER MAY ONLY BE LEFT ALONE WITH CHILDREN PRESCHOOL AGE AND OLDER DURING THE FOLLOWING PERIODS OF CHILD CARE OPERATION:
 - A. OPENING ASSISTANT CHILDCARE TEACHERS MAY BE ALONE WITH CHILDREN FOR THE FIRST ($\mathbf{1}^{ST}$) TWO (2) HOURS OF A CHILD CARE CENTER'S DAILY OPENING HOURS. STAFF TO CHILD RATIO'S SHALL BE MAINTAINED AT ALL TIMES.
 - B. NAP TIME ASSISTANT CHILDCARE TEACHERS MAY BE ALONE WITH CHILDREN FOR UP TO ONE (1) HOUR DURING NAP-TIME. STAFF TO CHILD RATIO'S SHALL BE MAINTAINED AT ALL TIMES.
 - C. CLOSING ASSISTANT CHILDCARE TEACHERS MAY BE ALONE WITH CHILDREN FOR UP TO TWO (2) HOURS OF A CHILD CARE CENTER'S DAILY CLOSING OPERATIONS. STAFF TO CHILD RATIO'S SHALL BE MAINTAINED AT ALL TIMES.
- 57. In determining staff-child ratios, only staff members who work directly with children are counted.
- 8. AT LEAST ONE STAFF MEMBER WITH CURRENT MEDICATION ADMINISTRATION TRAINING AND DELEGATION SHALL BE ON DUTY AT ALL TIMES. IN ADDITION, AT LEAST ONE STAFF MEMBER WITH CURRENT TRAINING AND DELEGATION FOR ANY CHILD SPECIFIC HEALTH CARE PLANS SHALL BE ON DUTY AT ALL TIMES THE CHILD/CHILDREN ARE PRESENT.
- 69. Formal kindergarten class sessions must SHALL have 1 staff member for each TWENTY-FIVE (25) or fewer children in attendance. At other parts of the day when children are in attendance, the ratio must SHALL be ONE (1) staff member to each FIFTEEN (15) or fewer children.
- 710. ALL CChildren of the director or of staff members who attend the center and other children on the premises for supervision and care must SHALL be counted IN against the THE licensed capacity AND RATIO in theIR appropriate age groups. AND SHALL BE CARED FOR IN THE AGE APPROPRIATE CLASSROOM. CHILDREN ON SITE BUT NOT REQUIRING STAFF SUPERVISION AND CARE SHALL BE UNDER THE DIRECT CARE AND CONTROL OF AN ADULT WHO IS NOT ON DUTY AT THE FACILITY OR IS A PARENT OR GUARDIAN WHO IS PICKING UP OR DROPPING OFF A CHILD ENROLLED IN THE FACILITY.
- In determining staff-child ratios, children who are in attendance for only part of the day are counted only while at the center.

- 11. NAP TIME RATIO MAY BE DOUBLED FOR CHILDREN TWO AND ONE HALF (2 ½) YEARS OLD AND OLDER IN PRESCHOOL CLASSROOMS WHEN THE FOLLOWING CONDITIONS HAVE BEEN MET:
 - A. AT LEAST HALF OF THE CHILDREN ARE SLEEPING.
 - B. ANOTHER STAFF MEMBER IS ONSITE IN THE FACILITY AND IMMEDIATELY AVAILABLE.
 - C. MAXIMUM GROUP SIZE AND ROOM CAPACITY ARE NOT EXCEEDED.
 - D. STAFF MEMBER SUPERVISING THE CHILDREN IS QUALIFIED AS AN EARLY CHILDHOOD TEACHER.

912. Staff-Child Ratios

AGES OF CHILDREN	NUMBER OF STAFF	
6 weeks to 18 months (infants)	1 staff member to 5 infants	
12 months to 36 months	1 staff member to 5 toddlers	
24 months to 36 months	1 staff member to 7 toddlers	
2 1/2 years to 3 years	1 staff member to 8 children	
3 years to 4 years	1 staff member to 10 children	
4 years to 5 years	1 staff member to 12 children	
5 years and older	1 staff member to 15 children	
Mixed age group 2 1/2 years to 6 years	1 staff member to 10 children	

In other preschool age combinations, the staff ratio for the youngest child must SHALL be utilized if more than TWENTY PERCENT (20%) of the group is composed of younger children. THIS DOES NOT APPLY TO CHILDREN UNDER TWO AND ONE HALF (2 ½) YEARS OF AGE OR CHILDREN IN A ROOM LICENSED FOR TODDLERS.

Drop-in child care centers may SHALL follow AT LEAST a ratio of one (1) adult for every eight (8) children for children in a mixed age group of TWO (2) years of age to TWELVE (12) years. ONE TO TWO (1-2) children ONE (1) year of age to TWO (2) years of age may join the preschool age group of children for short periods of time TWENTY (20) MINUTES for structured activities as long as the ONE (1) year old children are safely confined in a toddler seat or high chair. CHILDREN SHALL NOT BE CONFINED TO A TODDLER SEAT OR HIGHCHAIR FOR LONGER THAN TWENTY (20) MINUTES UNLESS EATING.

13. Maximum Group Size for Children

AGES OF CHILDREN	MAXIMUM GROUP SIZE	INDOOR/OUTDOOR CLASSROOM CAPACITY
6 weeks to 18 months	10 12 infants	<mark>12</mark>
12 months to 36 months	10 toddlers	<mark>10</mark>
24 months to 36 months	14 toddlers	<mark>14</mark>
2 1/2 years to 3 years	16 children	
3 years to 4 years	20 children	BASED ON SQUARE
4 years to 5 years	24 children	FOOTAGE NOT
5 years and older	30 children	ACTUAL GROUP SIZE
Mixed age group 2 1/2 years to 6 years	20 children	

In other preschool age combinations, the maximum group size for the youngest child must SHALL be utilized if more than TWENTY PRECENT (20%) of the group is composed of younger children. THIS DOES NOT APPLY TO CHILDREN UNDER TWO AND ONE HALF (2 ½) YEARS OF AGE OR CHILDREN IN ANY ROOM LICENSED FOR TODDLERS.

Preschool age and school-age groups of children must SHALL be separated into age-appropriate activities. Groups are not required to be separated from each other by permanent or portable dividers or walls.

Toddler-age groups of children must SHALL be separated from each other by STURDY permanent or STURDY portable dividers or other methods as approved by the Department.

MAXIMUM GROUP SIZE FOR INFANTS SHALL BE TWELVE (12) ONLY IF THE ROOMS SQUARE FOOTAGE AND EQUIPMENT CAN ACCOMMODATE TWELVE (12) INFANTS AND A RATIO OF ONE (1) TO FOUR (4) IS MAINTAINED WHEN MORE THAN TEN (10) INFANTS ARE PRESENT.

B. Service/Housekeeping Personnel

- 1. Service personnel must SHALL be available for housekeeping and food preparation as needed for adequate THE operation and maintenance of the center.
- 2. Assignment of housekeeping and maintenance duties to child care staff must SHALL not interfere with their supervisory responsibilities and child care duties.

C. CHILD CARE Health Consultant

- Staff must SHALL consult with a currently Colorado licensed registered nurse with knowledge and experience in maternal and child health, a pediatric nurse practitioner or a family nurse practitioner, or a pediatrician OR FAMILY PRACTICE DOCTOR at least once a month at the child care facility. The monthly consultation must SHALL be specific to the needs of the facility and include some of the following topics: training, delegation and supervision of medication administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development. TRAINING COULD INCLUDE AN ANNUAL REVIEW OF STANDARD PRECAUTIONS (FORMALLY UNIVERSAL PRECAUTIONS) TRAINING.
- In part day preschools that operate less than four (4) hours per day or drop-in child care centers, consultation must SHALL occur as often as the nurse delegating medications requires.
- 3. CHILD SPECIFIC ASSESSMENTS SHALL BE CONDUCTED ONLY WITH WRITTEN PARENTAL CONSENT.
- 4.-2. The date and content of each consultation must SHALL be recorded and maintained in the center's files.
- 5. THE CENTER SHALL MAINTAIN DOCUMENTATION THAT INCLUDES THE CHILD CARE HEALTH CONSULTANT'S (CCHC) DEPARTMENT OF REGULATORY AGENCIES AND PROOF OF RN OR MD CURRENT LICENSURE IN GOOD STANDING, A BRIEF BIOGRAPHY HIGHLIGHTING APPLICABLE KNOWLEDGE, EXPERIENCE AND APPROXIMATE DATE THAT WORK AS A SCHOOL NURSE OR CCHC COMMENCED.

6. IF THE CCHC HAS NOT WORKED AS A SCHOOL NURSE OR CCHC PRIOR TO 6/1/2011, THE FACILITY SHALL REQUEST PROOF THAT THE CCHC HAS COMPLETED THE CCHC ONLINE TRAINING AVAILABLE THROUGH WWW.CO.TRAIN.ORG.

D. Substitutes

- 1. Qualified staff must SHALL be available to substitute for regularly assigned staff that are sick, on vacation, or otherwise unable to be on duty.
- 2. IN THE ABSENCE OF THE DIRECTOR, THE NAME OF THE DIRECTOR'S SUBSTITUTE SHALL BE POSTED IN PLAIN VIEW WHILE THAT PERSON IS IN CHARGE.
- 23. In the absence of the director of a small center, an individual who meets director qualifications for a small center OR A QUALIFIED EARLY CHILDHOOD TEACHER WITH AT LEAST ONE (1) YEAR OF EXPERIENCE AT THE CENTER must SHALL substitute for the director.
- 34. If the director of a large center cannot be present sixty percent (60%) of any day, a center staff member or other individual who meets director qualifications as listed at Section 7.702.52 for a large center OR A QUALIFIED EARLY CHILDHOOD TEACHER WITH AT LEAST ONE (1) YEAR OF EXPERIENCE AT THE CENTER IS ABLE TO SUBSTITUTE FOR UP TO TWO (2) WEEKS PER CALENDAR YEAR. must substitute for the director. DOCUMENTATION OF THE DATES AND NUMBER OF HOURS THE SUBSTITUTION OCCURS SHALL BE ON FILE FOR REVIEW.
- 45. When there is a director vacancy, a director-qualified substitute must SHALL be present at the center at least sixty percent (60%) percent of any day the center is open until a new director is appointed.
- 6. FOR EXTENDED DIRECTOR ABSENCES (MOREN THAN TWO (2) WEEKS AND UP TO TWELVE (12) WEEKS PER CALENDAR YEAR) A STAFF MEMBER WITH FIFTY PRECENT (50%) OF THE DIRECTOR QUALIFICATION REQUIREMENTS COMPLETED IN EDUCATION AS WELL AS EXPERIENCE IS ABLE TO SUBSTITUTE FOR THE DIRECTOR. DATES SHALL BE DOCUMENTED AND ON FILE FOR REVIEW.
- 56. Substitutes for directors of part-day public school preschools may be from the sponsoring school system's list of approved substitutes. Substitutes who do not meet director qualifications must SHALL consult with a qualified director on administering the center in accordance with early childhood principles and practices and licensing rules.

7.702.56 Infant Nursery Staff [Rev. eff. 5/1/10]

A. Staff Requirements

- If a center operates solely as an infant nursery, there must SHALL be a director who
 meets the qualifications for a director of either a small center or a large center
 (Sections 7.702.52 and 7.702.53), depending upon the number of children for which the
 infant center is licensed.
- 2. The infant nursery must SHALL have an infant nursery supervisor who has verified training and experience in one of the following:
 - a. A registered nurse, WITH A licensed to practice in Colorado IN GOOD STANDING, with a minimum of SIX (6) months of experience in the care of infants.

- b. A licensed practical nurse, WITH A licensed to practice in Colorado IN GOOD STANDING, with twelve (12) months of experience in the care of infants.
- c. An adult who holds a certificate in infant and toddler care from an accredited college or university with completion of a minimum of THIRTY (30) semester CREDIT hours in the development and care of infants and toddlers in a group setting.
- d. An adult who is currently certified as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) and has completed the Department approved expanding quality in infant and toddler development course of training by May 31, 2012.

e. An adult who:

- 1) Is at least NINETEEN (19) years of age, and,
- 2) Is qualified as an early childhood teacher (Section 7.702.56, A, 4 7.702.54, A, 1), and,
- 3) Has a minimum of TWELVE (12) months of verifiable full-day experience in the group care of infants or toddlers; and,
- 4) Has completed at least two (2) THREE (3)-semester CREDIT hour college courses from a regionally accredited college or university on the development and care of infants and toddlers in a group setting, one (1) of which must SHALL be infant/toddler development or the Department approved expanding quality in infant and toddler development course of training by May 31, 2012.

f. An adult who:

- 1) Is at least NINETEEN (19) years of age, and
- 2) Is qualified as an early childhood teacher (Section 7.702.56, A, 4 7.702.54, A, 1), and
- 3) Has at least two (2) years of verifiable full-day experience in the group care of infants or toddlers, and
- 4) Will complete within the first SIX (6) months of employment two (2) threesemester CREDIT hour college courses from a regionally accredited college or university with one of the courses being infant/toddler development or the Department approved expanding quality in infant and toddler development by May 31, 2012.
- 3. An infant nursery early childhood teacher must SHALL have completed eight (8) hours of orientation in the infant nursery from the infant nursery supervisor including, but not limited to, the following topics:
 - a. Toys and equipment, appropriate activities for infants and toddlers, appropriate sleep positions for infants and toddlers, the safe and appropriate diaper change technique; and,
 - b. At least SIX (6) months of experience in the care of infants or toddlers; and,

- c. Meet qualifications for an early childhood teacher found at Section 7.702.54, A, or be qualified as an infant nursery supervisor.
- 4. The infant nursery staff aide must SHALL be at least eighteen (18) years old, must SHALL have completed eight (8) hours of orientation as listed above, at the infant nursery and must SHALL work under the direct supervision of an infant early childhood teacher.
- 5. There must SHALL be at least one (1) staff member on duty in each infant room at all times who holds a current Department-approved First Aid (1ST) and Safety certificate that includes CPR for all ages of children.

B. Required Staff and Supervision

(See chart in Section 7.702.55)

- In the infant nursery there must SHALL be a qualified infant nursery supervisor present 60 percent (60%) of the hours of operation of the infant nursery who is responsible for the care of the infants. An individual qualified as an infant nursery group leader EARLY CHILDHOOD TEACHER must SHALL be responsible during the remaining time.
- 2. The infant nursery supervisor or an infant nursery group leader must SHALL be assigned to each group of TEN (10) or fewer infants in attendance. An infant nursery staff aide may be assigned to assist the infant nursery supervisor or group leader EARLY CHILDHOOD TEACHER when SIX (6) through TEN (10) infants are in care in the group to maintain the staff ratio of ONE (1) adult for each FIVE (5) infants.
- 3. There must SHALL be assigned at least ONE (1) infant nursery supervisor in the infant nursery for each TWENTY (20) or fewer infants in attendance.

7.702.57 Toddler Nursery Staff

A. Staff Requirements

- If a center operates solely as a toddler nursery, there must SHALL be a director who meets the qualifications for a director of either a large center or a small center (7.702.52 and 7.702.53), depending upon the number of children for which the toddler center is licensed.
- 2. The toddler group leader EARLY CHILDHOOD TEACHER, a staff member assigned responsibility for a single group and working under the supervision of the director, must SHALL meet at least one of the following qualifications:
 - a. A registered nurse, WITH A licensed to practice in Colorado IN GOOD STANDING, with a minimum of SIX (6) months of experience in the care of infants.
 - b. An adult who holds a certificate in infant and toddler care from an accredited college or university with completion of at least THIRTY (30) semester CREDIT hours or equivalent in such courses as child growth and development, nutrition, and care practices with children birth to THREE (3) years old.
 - c. An adult who is certified as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or holds another Department-approved certificate.
 - d. A licensed practical nurse, WITH A licensed to practice in Colorado IN GOOD STANDING, with twelve (12) months of experience in the care of infants.

- e. An adult who meets the education and experience requirements for group leader EARLY CHILDHOOD TEACHER of a large center (Section 7.702.54, A).
- 3. Staff aides must SHALL be at least SIXTEEN (16) years of age, must SHALL work directly under the supervision of the director or a toddler group leader EARLY CHILDHOOD TEACHER, and must SHALL have completed EIGHT (8) hours of orientation at the toddler nursery.
- 4. For every FIFTEEN (15) or fewer toddlers, there must SHALL be at least ONE (1) staff member in the toddler nursery at all times who has a current Department-approved first aid and safety certificate that includes CPR for all ages of children.
- B. Staff-Child Ratio & Group Size

(See chart in Section 7.702.55)

One qualified toddler group leader EARLY CHILDHOOD TEACHER must SHALL be assigned to each group at all times, and additional staff must SHALL be assigned to meet the required staff-child ratio.

7.702.58 Infant and Toddler Nurseries Affiliated with Public School Teen Parent Programs

- A. Infant nursery programs affiliated with teen parent programs that are operated by accredited public school systems and on school premises may substitute the following age requirements for those at Section 7.702.2,B, 3.
 - 1. The minimum age of infants in care is SEVEN (7) days.
 - 2. Infants between the ages of SEVEN (7) and 14 days SIX (6) WEEKS may SHALL be accepted for care only with written approval from a health care professional and if there are no medical complications for the infant and/or teen mother.
 - 3. Infants 14 days of age and over may be accepted for care if there are no medical complications for the infant and/or teen mother.
 - 3.4. The maximum age of infants in care may SHALL be extended only in those situations where no teen parent program toddler nursery exists. In this circumstance, an infant may SHALL remain in the infant nursery until the end of the school semester in which the infant becomes EIGHTEEN (18) months old.
 - 5. CARE SHALL BE PROVIDED AT THE SCHOOL THE TEEN PARENT ATTENDS.
- B. Infant and toddler nursery programs affiliated with teen parent programs that are operated by accredited public school systems on school premises may substitute the following staff requirements for those at 7.702.56 and 7.702.57:
 - Director qualifications ARE ABLE TO may be met by a certified teacher with a
 major in home economics education or a vocationally credentialed teacher in
 consumer and homemaking or early childhood occupations. The director must
 SHALL complete at least THREE (3) semester CREDIT hours in administration of a
 child care center.
 - 2. The director must SHALL be present in the nursery or adjacent teen parent classroom at least SIXTY (60%) percent of any day the center is open.

- 3. If the director cannot be present SIXTY (60) percent of any day, an individual who meets director qualifications must SHALL substitute for the director.
- 4. Infant staff aides must SHALL be at least FIFTEEN (15) years of age and may SHALL be parents-to-be, parents of enrolled infants, or students enrolled in a child care related course with the sponsoring school system.
- 5. Substitutes for nursery staff must SHALL be from the sponsoring school system's list of approved substitute nursery staff members. Substitutes who do not meet minimum staff qualifications can SHALL work in the nursery no more than TEN (10) consecutive days per assignment.
- 6. Substitutes for nursery staff must SHALL hold a current department-approved first aid (1ST) and safety certificate that includes CPR for all ages of children.
- 7.702.6 CHILD CARE SERVICES
- 7.702.61 Admission Procedure
- Rev. eff.

 A. The center can SHALL accept AND CARE FOR children only of the ages for which it has been licensed. At no time can SHALL the number of children in attendance exceed the number for which the center has been licensed.
 - B. Admission procedures must SHALL be completed prior to the child's attendance at the center and must SHALL include:
 - A pre-admission interview with the child's parent(s) or guardian(s) to determine whether the services offered by the center will meet the needs of the child and the parent(s) or guardian(s).
 - 2.1. Explanation of the center's policies and procedures. Parents' signatures must be secured, SHALL SIGN A STATEMENT indicating that they have RECEIVED, read, UNDERSTAND and agree to the center's policies and procedures.
 - 3.2. Completion of the registration information required for inclusion in the child's record as required in Section 7.702.101. EACH OF THE FOLLOWING SHALL BE OBTAINED PRIOR TO ADMISSION AND UPDATED ANNUALLY FOR EACH CHILD IN CARE:
 - A. THE CHILD'S FULL NAME, BIRTH DATE, ADDRESS, AND DATE OF ADMISSION.
 - B. FULL NAMES, ADDRESSES, AND PHONE NUMBERS OF EACH PARENT/GUARDIAN ALONG WITH ANY SPECIFIC INSTRUCTIONS FOR CONTACT.
 - C. NAMES AND PHONE NUMBERS OF PERSONS AUTHORIZED TO PICK UP CHILDREN.
 - D. NAMES, ADDRESSES, AND PHONE NUMBERS OF AT LEAST TWO PERSONS WHO SHALL ASSUME RESPONSIBILITY FOR THE CHILD IN THE EVENT PARENTS/GUARDIANS CANNOT BE REACHED.
 - E. NAME, ADDRESS, AND PHONE NUMBER OF CHILD'S, HEALTH CARE PROVIDER AND DENTIST IF AVAILABLE.

- F. A WRITTEN AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT INCLUDING HOSPITAL PREFERENCE.
- H. HEALTH INFORMATION FOR A CHILD ENTERING THE CENTER, INCLUDING ANY KNOWN ALLERGIES, MEDICATION BEING TAKEN, SPECIAL DIETS REQUIRED, AND CHRONIC HEALTH AND MENTAL HEALTH CONDITIONS.
- I. A HEALTH CARE PLAN AUTHORIZED BY THE CHILD'S HEALTH CARE PROVIDER AND PARENT DEFINING THE INTERVENTIONS NEEDED TO CARE FOR A CHILD WHO HAS AN IDENTIFIED HEALTH CONDITION OR DEVELOPMENTAL CONCERN INCLUDING BUT NOT LIMITED TOO: SEIZURES, ASTHMA, DIABETES, SEVERE ALLERGIES, HEART OR RESPIRATORY CONDITIONS, AND PHYSICAL OR EMOTIONAL DISABILITIES.
- C. CHILDREN WITH Special HEALTH CARE Needs Children
 - The admission of a child with special needs must SHALL be in compliance with the Americans with Disabilities Act, and a reasonable effort must SHALL be made to accommodate the child's needs and to integrate the child with other children. (See General Rules for Child Care Facilities, Section 7.701.14)
 - 2. INFORMATION AND HEALTH CARE PLAN SHALL BE OBTAINED ON THE CARE OF EACH CHILD WHO HAS AN IDENTIFIED HEALTH CONDITION OR DEVELOPMENTAL CONCERNS, INCLUDING, BUT NOT LIMITED TO SEIZURES, ASTHMA, DIABETES, ALLERGIES, HEART OR RESPIRATORY CONDITIONS, AND PHYSICAL OR EMOTIONAL DISABILITIES; AND,
 - 2. 3. Upon enrollment of a child with special health care needs, the center must SHALL obtain from the child's parent or guardian a copy of an existing individualized health care plan for the child that can SHALL be reviewed, adopted, and FOLLOWED implemented by the center staff when providing child CARING FOR care services to the child. An individualized health care plan shall include BUT NOT BE LIMITED TO the following as needed for the child and must SHALL be signed by the PARENT AND health care provider: THE PLAN SHALL BE UPDATED AT LEAST EVERY TWELVE (12) MONTHS FROM THE DATE OF THE INITIAL PLAN AND OR AS CHANGES OCCUR.
 - a. Medication schedule ORDERS
 - b. Nutrition and feeding instructions
 - c. Medical equipment or adaptive devices, including instructions
 - d. Medical emergency instructions
 - e. Toileting and personal hygiene instructions
 - F. BEHAVIORAL INTERVENTIONS
 - G. MEDICAL PROCEDURE/INTERVENTION ORDERS

- 3. For a child with special health care needs, the center must SHALL obtain written instructions for providing services from the child's parents or legal guardian and the health care provider. If the child with special health care needs does not have an existing individualized health care plan, the individualized health care plan must SHALL be completed within 30 calendar days of by the child's enrollment FIRST (1ST) DAY OF CARE.
- 4. The plan must be updated at least every 12 months from the date of the initial plan or as changes occur.
- 5. The center must SHALL inform its child care health consultant as seen as possible PRIOR TO of the enrollment of a child with special health care needs so staff can receive training and support as indicated by the child's individualized health care plan.
- D. If the parent agrees that the center should care for a child in the infant nursery who is EIGHTEEN (18) months or older, the center must SHALL have on file a written statement from a licensed physician HEALTH CARE PROVIDER confirming that care for the child is appropriate in this infant nursery.
- E. If the parent agrees that the center should care for a child in the toddler nursery who is TWELVE (12) months old but not walking independently, or is over 36 months old, the center must SHALL have on file a written statement from a licensed physician HEALTH CARE PROVIDER confirming that care for the child is appropriate in this toddler nursery.

7.702.62 Health Care

Rev. eff. 4/1/06

A. Statements of Health Status

- At the time of admission, the center must obtain health information for each child entering the center, including any known allergies, medication being taken, special diets required, or any chronic health condition. The name, address, and phone number of the child's physician and dentist must be provided. The center must also obtain information regarding all immunizations a child has had, including month, date, and year each immunization was administered. Immunizations must be recorded on the Certificate of Immunization form supplied by the Colorado Department of Public Health and Environment (CDPHE) or an approved alternate certificate approved by CDPHE. If immunizations are contraindicated because of a medical condition, a statement from the child's health care provider must be on file.
- 21. The parent or guardian of each child 2 1/2 years of age and over must submit a statement of the child's current health status signed and dated by an approved health care professional who has seen the child within the last 12 months. The statement of health status must be obtained at the time of admission or within 30 days after admission or fFor a drop-in child care center at the second visit, whichever is longer, must be kept at the center. If a child has an identified health condition or developmental concern including, but not limited to, seizures, asthma, diabetes, allergies, heart or respiratory conditions, and physical disabilities, information and instruction on care of the child must be included on the

statement of health status signed by the physician. The center has the right to refuse to admit a child if a statement from an approved health care professional is not submitted.

- 2. AT THE TIME OF ADMISSION, THE PARENT OR GUARDIAN SHALL PROVIDE THE FOLLOWING INFORMATION TO THE CENTER FOR EACH CHILD ENTERING THE CENTER:
 - a. HEALTH INFORMATION, INCLUDING ANY KNOWN ALLERGIES, MEDICATION BEING TAKEN AND POSSIBLE SIDE EFFECTS, SPECIAL DIETS REQUIRED, AND CHRONIC HEALTH CONDITIONS; AND.
 - b. INFORMATION AND HEALTH CARE PLAN ON THE CARE OF EACH CHILD WHO HAS AN IDENTIFIED HEALTH CONDITION OR DEVELOPMENTAL CONCERNS, INCLUDING, BUT NOT LIMITED TO SEIZURES, ASTHMA, DIABETES, ALLERGIES, HEART OR RESPIRATORY CONDITIONS, AND PHYSICAL OR EMOTIONAL DISABILITIES; AND,
 - c. DOCUMENTATION OF IMMUNIZATION STATUS OR EXEMPTION, INCLUDING MONTH AND YEAR EACH IMMUNIZATION WAS ADMINISTERED. IMMUNIZATIONS SHALL BE UPDATED AND RECORDED AS SPECIFIED ON THE CERTIFICATE OF IMMUNIZATION OR ALTERNATE CERTIFICATE OF IMMUNIZATION AS SUPPLIED AND APPROVED BY THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. COLORADO LAW REQUIRES THAT PROOF OF IMMUNIZATION BE PROVIDED PRIOR TO OR ON THE FIRST (1ST) DAY OF ADMISSION.
- 3. WITHIN THIRTY (30) DAYS AFTER ADMISSION, AND WITHIN THIRTY (30) DAYS FOLLOWING THE EXPIRATION DATE, THE PARENT OR GUARDIAN OF EACH CHILD SHALL SUBMIT A STATEMENT OF THE CHILD'S CURRENT HEALTH STATUS OR WRITTEN VERIFICATION OF A SCHEDULED APPOINTMENT WITH A HEALTH CARE PROVIDER. THE STATEMENT OF THE CHILD'S CURRENT HEALTH STATUS SHALL BE SIGNED AND DATED BY A HEALTH CARE PROVIDER WHO HAS SEEN THE CHILD WITHIN THE LAST TWELVE (12) MONTHS, OR WITHIN THE LAST SIX (6) MONTHS FOR CHILDREN UNDER TWO AND ONE-HALF (2½) YEARS OF AGE. THE STATEMENT SHALL INCLUDE WHEN THE NEXT VISIT IS REQUIRED BY THE HEALTH CARE PROVIDER. ALL HEALTH STATEMENTS SHALL BE KEPT AT THE CENTER.
- PARENT(S)/GUARDIAN(S) SHALL BE NOTIFIED IN THE WRITTEN POLICIES IF THE CENTER ACCEPTS CHILDREN IN CARE WHO MAY NOT BE IMMUNIZED.
- 5. STATEMENTS OF HEALTH STATUS OF CHILDREN UNDER TWO (2) YEARS OF AGE SHALL BE UPDATED IN ACCORDANCE WITH THE NATIONALLY RECOGNIZED PEDIATRIC RECOMMENDED SCHEDULE FOR ROUTINE HEALTH SUPERVISION OR AS REQUIRED IN WRITING BY HEALTH CARE PROVIDER.
- 6. HEALTH STATEMENTS FOR CHILDREN OVER TWO (2) YEARS TO SEVEN (7) YEARS OF AGE SHALL BE UPDATED IN ACCORDANCE

WITH THE NATIONALLY RECOGNIZED PEDIATRIC RECOMMENDED SCHEDULE.

- 3. 7. Subsequent statements of the child's current health status, signed and dated by an approved health care professional, must be obtained at least annually for each child 2 to 6 years of age and w Whenever the director has reason to suspect that a child participating in the program may have a condition potentially hazardous to THE CHILD OR others, or finds that the child's general condition indicates the need for such examination THE DIRECTOR SHALL REQUIRE A STATEMENT FROM THE CHILD'S HEALTH CARE PROVIDER THAT THE CHILD IS APPROVED TO RETURN TO GROUP CARE.
- 4. For children 6 years of age and older or who have completed the first grade, subsequent statements of health status must be submitted every 3 years thereafter.
- 5.8. For children attending a drop-in child care center, subsequent statements are not necessary if there have been no health changes in the child and the parent(s) attest in writing to the health status of the child on an annual basis. Children with special medical needs must SHALL have the statement from a health care professional as indicated at Section 7.702.62, A, 3-4.

Parents must be notified in writing prior to their child's enrollment in the Center if non-immunized children are admitted to the Center. This information must be contained in the policies required at Section 7.702.41, F.

7. In an infant nursery, at the time of admission or within 30 days, each infant's parent or guardian must submit a statement dated and signed by an approved health care professional. The statement must include information about the infant's health status and special needs. All immunizations must be recorded on the Certificate of Immunization supplied by CDPHE or an approved alternate certificate approved by CDPHE, including month, day, and year each immunization was administered, and must be on file the first day of admission.

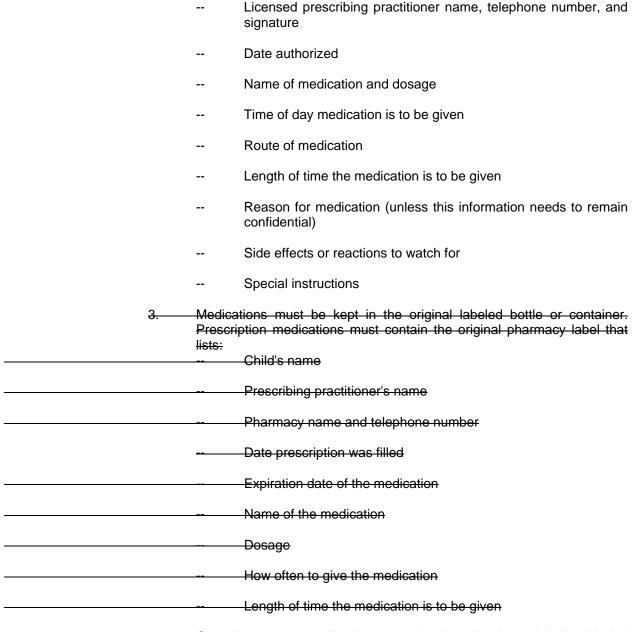
Infants and toddlers under 2 years of age must follow the recommended Academy of Pediatrics schedule for routine health assessments.

- 8. In a toddler nursery, at the time of admission or within 30 days, each toddler's parent or guardian must submit a statement of the child's health status as required at Section 7.702.62, A, 2, signed and dated by an approved health care professional who has seen the child within the last 6 months.
- B. Emergency Procedures
 - At the time of admission, the center must obtain telephone numbers of the child's physician or other appropriate health care professional and numbers where the parent or guardian and at least 1 other responsible adult can typically be reached in the event of accident, illness, or other emergency.

- 2. The center must obtain written authority to arrange for medical care in the event of an emergency. This information must be on file the first day a child attends the center.
- 1. FOR EACH CHILD ENROLLED A WRITTEN AUTHORIZATION TO OBTAIN EMERGENCY MEDICAL CARE SHALL BE ON FILE PRIOR TO OR ON THE FIRST (1ST) DAY OF CARE AND SHALL BE REAUTHORIZED ANNUALLY.
- 3. 2. When accidents, injuries, or illnesses occur, the director or responsible adult in charge must SHALL notify the parent or guardian of the child and if necessary call EMERGENCY MEDICAL PERSONNEL the physician or medical facility as instructed in writing by the parent or guardian. A WRITTEN LOG SHALL BE MAINTAINED.
- 4. 3. For every THIRTY (30) or fewer children in attendance, there must SHALL be at least one (1) staff member on duty who holds a current department-approved first aid and safety certificate (including CPR for all ages of children) and is responsible for administering first aid and CPR to children. Such individuals must SHALL be with the children at all times when the center is in operation. If children are at different locations, there must SHALL be a first aid and CPR qualified staff member at each location.
- 5. 4. Children too ill to remain in the group CARE must SHALL be SEPARATELY comfortably cared for and ACTIVELY supervised until they ARE can be taken home or suitably cared for elsewhere RELEASED FROM THE FACILITY.
- 6. 5. Portable first aid kits must be FIRST AID (1ST) SUPPLIES MUST SHALL BE READILY available to staff at all times, including field trips., and must be located out of reach of children and maintained in a sanitary condition. First aid kits must be checked and restocked on at least a monthly basis. FIRST AID SUPPLIES SHALL INCLUDE BAND AIDS, TAPE, GAUZE, DISPOSABLE GLOVES AND COMPRESSION BANDAGES.

C. Medication

- Prescription and non-prescription (over-the-counter) medications for 1. eves or ears, all oral medications, topical medications inhaled medications, and certain emergency injections can be administered only with the written order of a person with prescriptive authority and with written parental consent. Centers may administer medications for chronic health conditions or emergency situations. ANY ROUTINE MEDICATION. PRESCRIPTION OR NON-PRESCRIPTION (OVER-THE-COUNTER) SHALL BE ADMINISTERED ONLY WITH A CURRENT WRITTEN ORDER OF A HEALTH CARE PROVIDER WITH PRESCRIPTIVE AUTHORITY AND WITH WRITTEN PARENTAL CONSENT. HOME REMEDIES SHALL NEVER BE GIVEN TO A CHILD.
- The written order by the licensed prescribing practitioner PERSON WITH PRESCRIPTIVE AUTHORITY must SHALL include:
 - -- Child's name



Over-the-counter medication must be kept in the originally labeled container and be labeled with the child's first and last name.

- 4. 3. In the case medication needs to be given on an ongoing, long-term basis, the WRITTEN authorization and consent forms must SHALL be reauthorized on AT LEAST an annual basis. Any changes in the original medication authorization require a new written order by the prescribing practitioner and a change in the prescription label. ACETAMINOPHEN OR IBUPROFEN IS ABLE TO BE USED MULTIPLE TIMES WITH ONE CURRENT, SIGNED MULTI-USE MEDICATION ORDER FOR UP TO 3 (THREE) CONSECUTIVE DAYS IF THE ORDER IS SPECIFIC ABOUT WHEN THE MEDICATION IS TO BE GIVEN.
- 5. 4. All child care staff designated by the center director to give medications must SHALL complete the 4-hour Department-approved medication administration training AND HAVE CURRENT DELEGATION FROM

THE CENTER'S CHILD CARE HEALTH CONSULTANT. IN ADDITION THEY SHALL and have current CPR, first aid and STANDARD universal precautions training prior to administering medication WITH THE FOLLOWING EXCEPTIONS:

- BY 1. STAFF **DETERIMINED** THE DIRECTOR, IN CONSULTATION WITH THE **CHILD** CARE HEALTH CONSULTANT, TO BE RESPONSIBLE FOR PROVIDING EMERGENCY MEDICATIONS FOR THE TREATMENT OF SEVERE ALLERIGES OR INHALED MEDICATIONS FOR THE TREATMENT OF ASTHMA SHALL RECEIVE TRAINING AND DELEGATION FROM THEIR CHILD CARE HEALTH CONSULTANT FOR THOSE MEDICATIONS ONLY. STAFF SHALL THEN PROVIDE THOSE MEDICATIONS CHILDREN BASED ON THE INSTRUCTIONS ON THE CHILD'S INDIVIDUALIZED HEALTH CARE PLAN.
- 2. **STAFF DETERMINED** BY THE DIRECTOR. CONSULTATION WITH THE CHILD CARE HEALTH CONSULTANT, TO BE RESPONSIBLE FOR PROVIDING MEDICATIONS NOT COVERED IN THE TRAINING SHALL ALSO BE PERMITTED TO ADMINISTER PROVIDE **MEDICATIONS** AND/OR AND MEDICAL TREATMENTS SUCH AS RECTAL DIASTAT®. INSULIN OR WITH OXYGEN INDIVIDUALIZED **TRAINING** DELEGATION FROM THE CHILD CARE HEALTH CONSULTANT BASED ON THE CHILD'S HEALTH CARE PLAN.
- 3. STAFF MAY BE TRAINED AND DELEGATED IN THE ADMINISTRATION OF A SINGLE RESCUE MEDICATION OR RECUE MEDICAL INTERVENTION AND SUCH TRAINING AND DELEGATION QUALIFIED THE STAFF MEMBER TO PROVIDE THAT RESCUE MEDICATION OR TREATMENT FOR A SPECIFIC CHILD WITH A SIGNED HEALTH CARE PLAN.

 A. CHILD CARE STAFF SPECIFICALLY TRAINED TO ADMINISTER PESCUE MEDICATIONS OR PROVIDE
 - A. CHILD CARE STAFF SPECIFICALLY TRAINED TO ADMINISTER RESCUE MEDICATIONS OR PROVIDE INTERVENTIONS SHALL ALSO HAVE CURRENT CPR, FIRST (1ST) AID AND STANDARD PRECAUTIONS TRAINING.
- 4 3. Staff of drop-in child care centers may SHALL complete training from their nurse consultant delegating medication WHEN AN ENROLLED CHILD REQUIRES MEDICATION.
- 6.5. The center's licensed CHILD CARE hHealth consultant:
 - -- Must SHALL observe and document the competency of each staff member involved in medication administration
 - -- Must SHALL delegate AND PROVIDE DOCUMENTATION OF DELEGATION to one or more of the child care staff the task of medication administration, to include routine medications only. For medications not covered in the medication training, the CHILD CARE health consultant must SHALL provide additional training, delegate on a one-to-one (1:1) basis, and provide ongoing supervision.

- 7.6. Medications must SHALL be kept IN THE ORIGINAL CONTAINER in an CLEAN AND locked STORAGE area, and inaccessible to children BUT AVAILABLE TO APPROPRIATE, TRAINED STAFF RESPONSIBLE FOR ADMINISTERING MEDICATION IN ACCORDANCE WITH THE DEPARTMENT APPROVED MEDICATION **ADMINISTRATION** TRAINING. IF REFRIGERATION IS REQUIRED, THE MEDICATION SHALL BE STORED IN EITHER A SEPARATE REFRIGERATOR OR A LEAK PROOF CONTAINER IN A DESIGNATED AREA OF A FOOD STORAGE REFRIGERATOR, SEPARATED FROM FOOD AND INACCESSIBLE TO CHILDREN. Controlled medications must SHALL be counted and safely secured, and specific policies regarding their handling require special attention in the center's policies. Access to these medications must SHALL be limited (see Section 12-22-318, C.R.S.).
- 7. PRESCRIPTION MEDICATION CONTAINERS SHALL HAVE THE ORIGINAL PHARMACY LABEL, OR A COPY OF THE PHARMACY LABEL SHALL BE KEPT WITH THE MEDICATION IF PURCHASED IN QUANTITY. OVER THE COUNTER MEDICATIONS SHALL BE KEPT IN THE ORIGINAL LABELED CONTAINER AND BE LABELED WITH THE CHILD'S FIRST AND LAST NAME.
- 8. Children are not allowed to bring medications to AND FROM child care unless accompanied by a responsible adult.
- 9. IF A MEDICATION IS NO LONGER NEEDED, IS OUT OF DATE OR LEFT OVER, PARENTS OR GUARDIANS ARE RESPONSIBLE FOR PICKING UP THE MEDICATION. IF PARENTS DO NOT RESPOND, THE CENTER IS RESPONSIBLE FOR THE DISPOSAL OF ACCORDING CENTER **POLICY** MEDICATIONS TO AND PROCEDURES AND FOLLOWING THE GUIDELINES IN THE **APPROVED MEDICATION ADMINISTRATION** DEPARTMENT TRAINING. DISPOSAL OF MEDICATIONS SHALL BE DOCUMENTED.
- 910. A written medication log FOR EACH MEDICATION GIVEN must SHALL be kept for each child. This log is part of the child's records. The log must SHALL contain the following:
 - -- Child's name
 - -- Name of the medication, dosage, and route
 - -- DATE AND Time medication WAS is to be given
 - -- Special instructions
 - -- Name and initials of the individuals giving the medication
 - -- Notation if the medication was not given and the reason
- 1011. Topical preparations USED FOR PREVENTION ON UNBROKEN SKIN INCLUDING BUT NOT LIMITED TO such as petroleum jelly, diaper rash ointments, sunscreen and bug sprays INSECT REPELLANT, and other ointments may CAN SHALL be administered to children with written parental authorization AND ACCORDING TO MANUFACTURER'S LABEL INSTRUCTIONS. These preparations may not be applied to

- open wounds or broken skin unless there is a written order by the prescribing practitioner.
- XX TOPICAL PREPARATIONS USED AS TREATMENT ON OPEN WOUNDS OR BROKEN SKIN SHALL HAVE A WRITTEN ORDER FROM A PRESCRIBING HEALTH CARE PROVIDER IN ADDITION TO PARENT AUTHORIZATION.
- 12. WHEN SUPPLIED FOR AN INDIVIDUAL CHILD, TOPICAL PREPARATIONS SHALL BE LABELED WITH THE CHILD'S FIRST AND LAST NAME. IF PROVIDED BY THE FACILITY WRITTEN PERMISSION FROM THE PARENTS OR GUARDIANS SHALL BE OBTAINED PRIOR TO APPLICATION
- 13. THE FACILITY SHALL HAVE A WRITTEN POLICY ON THE STORAGE AND THE ACCESS OF INHALERS AND EPINEPHREN CARRIED BY SCHOOL AGED CHILDREN. THE POLICY SHALL INCLUDE A WRITTEN CONTRACT WITH THE CHILD, PARENT/GUARDIAN ASSIGNING LEVELS OF RESPONSIBILITY OF EACH INDIVIDUAL. THIS CONTRACT WILL ACCOMPANY ORDERS FOR THE MEDICATION FROM A HEALTH CARE PROVIDER ALONG WITH CONFIRMATION FROM THE HEALTH CARE PROVIDER THAT THE STUDENT HAS BEEN INSTRUCTED AND IS CAPABLE OF SELF-ADMINISTRATION OF THE PRESCRIBED MEDICATIONS.

D. Sun Protection

- 1. THE CENTER SHALL INFORM PARENTS OR GUARDIANS, THROUGH THE POLICIES AND PROCEDURES STATEMENT OR AN AUTHORIZATION FORM, THAT SUNSCREEN WILL BE APPLIED TO THE CHILDREN'S EXPOSED SKIN PRIOR TO OUTSIDE PLAY. A DOCTOR'S PERMISSION IS NOT NEEDED TO USE SUNSCREEN AT THE CENTER. PARENTS OR GUARDIANS SHALL NOTIFY THE CENTER STAFF IF SUNSCREEN HAS BEEN APPLIED TO THE CHILD'S SKIN PRIOR TO ARRIVING AT THE CENTER.
- 2. SUNSCREEN SHALL BE APPLIED ACCORDING TO THE MANUFACTURER'S INSTRUCTIONS FOR APPLICATION AND IN ACCORDANCE WITH THE MANUFACTURER'S RECOMMENDED AGE FOR USE.
- The center must obtain the parent or guardian's written authorization and instructions for applying sunscreen to their children's exposed skin prior to outside play. A doctor's permission is not needed to use sunscreen at the center.
- 23. When supplied for an individual child, the sunscreen must SHALL be labeled with the child's first and last name.
- 3. 4. If sunscreen is provided by the center, parents must SHALL be notified in advance, in writing, of the type of sunscreen the center will use.
- 45. Children over FOUR (4) years of age may ARE ALLOWED TO apply sunscreen to themselves under the direct supervision of a staff member.
- 6. A WRITTEN STATEMENT FROM A CHILD'S HEALTH CARE PROVIDER AND PARENT OR GUARDIAN IS NEEDED IF

SUNSCREEN IS NOT TO BE APPLIED. A WRITTEN PLAN TO PROTECT THE CHILD FROM OVER EXPOSURE TO THE SUN SHALL BE IN PLACE AND KNOWN TO STAFF CARING FOR THE CHILD.

E. Control of Communicable Illnesses

- 1. When A CHILD HAS BEEN/children have been diagnosed with aN communicable—illness DISEASE such as CHICKEN POX, hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, tuberculosis, giardia or shigella, the center must SHALL immediately notify the local health department or the State Department of Public Health and Environment, CDPHE, THEIR CHILD CARE HEALTH CONSULTANT, APPROPRIATE all staff members, and all parents and guardians of children in care. Children's confidentiality must SHALL be maintained.
- The director must SHALL ask parents to report exposure of a child to communicable illness DISEASE outside of the center, and, at the discretion of the director, the child should be excluded from the center for the period of time prescribed by the child's physician HEALTH CARE PROVIDER, CDPHE or by the local health department.
- 3. PROVIDER SHALL MAKE AN EFFORT TO CONTROL DISEASE BY WIPING NOSES, COVERING COUGHS AND SNEEZES BY TISSUE OR ARM, AND HAND WASHING.

F. SECOND (2ND) HAND SMOKE

- 1. ALL CHILD CARE CENTER STAFF SHALL PROTECT CHILDREN FROM EXPOSURE TO SECOND (2ND) HAND SMOKE; AND,
- 2. SMOKING ON THE PROPERTY IS PROHIBITED FOR ALL PROVIDER(S), EMPLOYEES, SUBSTITUTES, PARENTS, VISITORS, VOLUNTEERS, AND RESIDENTS; AND,
- 3. SMOKING IS PROHIBITED IN THE CENTER, ON THE PROPERTY, IN THE PLAY YARD AND IN THE PROXIMITY OF CHILDREN; AND, (CLEAN INDOOR AIR ACT C.R.S.25-14-204 (I).)
- 4. SMOKING IS PROHIBITED AT ALL TIMES WHILE TRANSPORTING CHILDREN ON FIELD TRIPS AND EXCURSIONS; AND, (CLEAN INDOOR AIR ACT C.R.S.25-14-204 (A).)
- 5. SMOKING INCLUDES CARRYING OR HAVING IN ONE'S POSSESSION A LIGHTED CIGARETTE, CIGAR, PIPE OR OTHER OBJECT GIVING OFF SMOKE.
- 6. STAFF SHALL PROTECT CHILDREN FROM KNOWN ENVIRONMENTAL ALLERGENS AND SENSITIVITIES LIKE AIR FRESHENERS, FRAGRANCES, SMOKE, CREAMS, ETC.

7.702.63 Personal Hygiene

Rev. eff. A. Hand Washing 10/1/03

Children's hand washing must be supervised and must be taught when necessary.

- ALL PROVIDERS SHALL WASH THEIR HANDS THOROUGHLY WITH SOAP UNDER WARM RUNNING WATER, WHEN AVAILABLE, AND DRY WITH AN INDIVIDUAL USE AND/OR SINGLE USE DISPOSABLE TOWEL:
 - A. BEFORE PREPARING, SERVING, AND EATING FOOD;
 - B. BEFORE ADMINISTERING MEDICATION;
 - C. AFTER HELPING A CHILD WITH TOILETING OR DIAPERING;
 - D. AFTER PROVIDER'S OWN TOILETING:
 - E. AFTER WIPING A CHILD'S NOSE;
 - F. WHENEVER POSSIBLE ON FIELD TRIPS, AT A PARK, OR AT ANOTHER LOCATION AWAY FROM THE CENTER;
 - G. AFTER HANDLING ANIMALS, THEIR TOYS, OR FOOD AND WATER BOWLS;
 - H. AFTER CONTACT WITH BODILY FLUIDS OR SECRETIONS; AND,
 - I. ANY OTHER TIME THE HANDS BECOME SOILED OR CONTAMINATED.
- 2. ALL CHILDREN SHALL WASH THEIR HANDS THOROUGHLY WITH SOAP AND UNDER WARM RUNNING WATER WHEN AVAILABLE AND DRY WITH AN INDIVIDUAL USE AND/OR SINGLE USE DISPOSABLE TOWEL:
 - A. BEFORE PREPARING AND EATING FOOD;
 - B. AFTER TOILETING OR DIAPERING;
 - C. AFTER WIPING A HIS/HER NOSE:
 - D. WHENEVER POSSIBLE ON FIELD TRIPS, AT A PARK, OR AT ANOTHER LOCATION AWAY FROM THE CENTER;
 - E. AFTER HANDLING ANIMALS, THEIR TOYS, OR FOOD AND WATER BOWLS:
 - F. AFTER CONTACT WITH BODILY FLUIDS OR SECRETIONS; AND.
 - G. ANY OTHER TIME THE HANDS BECOME SOILED OR CONTAMINATED.
- 3 HAND WASHING AREA SHALL BE STURDY AND ACCESSIBLE, PROMOTING SELF-HELP SKILLS TO INCLUDE BUT NOT BE LIMITED TO SOAP, AND TOWELS AT ACCESSIBLE LEVEL FOR CHILDREN. HOT WATER SHALL NOT EXCEED ONE HUNDRED TEN (110) DEGREES.
- SINKS SHALL BE USED ONLY FOR HAND WASHING OR SANITIZED AFTER EVERY DIFFERENT TYPE OF USE.
- 5. INFANTS SHALL EITHER HAVE THEIR HANDS WASHED WITH SOAP AND RUNNING WATER OR WITH AN INDIVIDUAL CLEAN, TOWELS/WASH CLOTH THAT CONTAINS SOAP AND RINSED WITH A SEPARATE CLEAN, TOWEL/CLOTH BEFORE DRYING.
- 6. CHILDREN ARE WASHED AFTER CONTAMINATIONS AND MESSY PLAY INCLUDING THEIR HANDS AND FACES.
- 7. CHILDREN'S TOWELS AND DRINKING CUPS SHALL NOT BE SHARED.

- 8. THE USE OF HAND SANITIZERS OR WIPES IN LIEU OF HANDWASHING IS NOT APPROVED FOR USE WITHIN THE FACILITY.
- 9. HAND SANITIZERS AND WIPES SHALL BE USED FOR STAFF AND CHILDREN THREE (3) YEARS OF AGE AND OLDER ONLY AT TIMES AND IN AREAS WHERE HANDWASHING FACILITIES ARE NOT AVAILABLE, SUCH AS OUTDOOR TIME IN REMOTE LOCATIONS.
- 10. HAND SANITIZERS AND WIPES SHALL BE STORED INACCESSIBLE TO CHILDREN.
- B. Diapering, TOILETING AND CHANGING OF SOILED CLOTHING
 - 1. EVERY FACILITY SHALL HAVE ACCOMMODATIONS AND EQUIPMENT IN EACH CLASSROOM TO ACCOMMODATE CHANGING A CHILD IN THE EVENT THE CHILD'S CLOTHES BECOME SOILED.
 - 2. EVERY FACILITY SHALL HAVE A WRITTEN PLAN DESCRIBING THE EQUIPMENT AND PROCESS THAT WILL BE USED WHEN A CHILD'S SOILED CLOTHING IS CHANGED.

(See also Section 7.702.83, A, 3)

C. DIAPERING

- 2. The center must have one or more designated diaper change area(s) for all 20 children in need of diaper changing. The diaper change area must:
- EVERY FACILITY SHALL HAVE AT LEAST ONE DESIGNATED DIAPER CHANGE AREA IN EACH INFANT AND EACH TODDLER CLASSROOM.
- EVERY FACILITY SHALL HAVE AT LEAST ONE DESIGNATED DIAPER CHANGE AREA FOR EVERY TWENTY (20) PRESCHOOL AGE CHILDREN FOR WHICH THE FACILITY IS LICENSED.
- EVERY DESIGNATED DIAPER CHANGE AREA SHALL MEET THE FOLLOWING:
 - 4.A. Be a minimum of THIRTY SIX (36) by EIGHTEEN (18) inches in size and large enough to accommodate the size of the child. ALL ELEVATED DIAPERING AREAS SHALL HAVE A SIX (6) INCH RAISED BARRIER.
 - 2.B. Be adjacent to er AND within ARMS reach of a hand washing sink SEPARATE FROM FOOD OR BOTTLE PREPERATION.
 - 3.C. IS ABLE TO BE STORED INACCESSIBLE TO ALL CHILDREN Have a place inaccessible to children for storing all diaper change supplies INCLUDING DIAPER BAGS and disinfecting solutions and products.is
 - 4.D. Have a sufficient supply of diapers at all times.

- 5.E. DIAPERS ARE CHECKED AND CHANGED AS NEEDED OR AT LEAST EVERY TWO (2) HOURS.
- 6.F. CHILDREN SHALL NOT BE POTTY TRAINED UNTIL THEY ARE ABLE TO VERBALIZE OR OTHERWISE INDICATES NEED, HELP MANIPULATE THEIR OWN CLOTHING, AND HELP ACCESS TOILETING FACILITIES.
- 7.G. FOR EACH CHILD WHO IS LEARNING TO USE A TOILET, THE CHILD'S INDIVIDUAL DEVELOPMENTAL ABILITIES AND NEEDS SHALL BE ACCOMODATED IN ACCORDANCE WITH NATIONALLY RECOMMENDED PROCEDURES. AND AS CONTAINED IN THE WRITTEN POLICIES AND PROCEDURES FOR THE FACILITY.
- 8.H. TOILETS SHALL BE FLUSHED AFTER EACH USE.
- ——— 9.1. THE USE OF POTTY CHAIRS IS PROHIBITED.
- C. THE FOLLOWING PROCEDURE SHALL BE FOLLOWED EACH TIME A DIAPER IS BEING CHANGED.
 - SOILED OR WET DIAPERS AND CLOTHING SHALL BE CHANGED PROMPTLY AND BE REPLACED WITH CLEAN DIAPERS AND CLOTHING WHENEVER NECESSARY.
 - 2. THE CHILD SHALL BE PLACED ON A CLEAN, SANITIZED, DRY CHANGING TABLE OR OTHER APPROVED EQUIPMENT.
 - 3. SINGLE USE GLOVES SHALL BE USED FOR EACH DIAPER CHANGE. FOOD SERVICE GLOVES OF THIN PLASTIC SHALL NOT BE USED.
 - 4. AN IMMEDIATELY ADJACENT HANDWASHING SINK THAT IS NOT USED FOR FOOD PREPARATION SHALL BE USED TO WASH HANDS AFTER EACH DIAPER CHANGE.
 - 5. CHILDREN'S HANDS SHALL BE WASHED WITH SOAP AND WATER AFTER DIAPERING.
 - 6. THE DIAPER CHANGING AREA SHALL BE CLEANED AND DISINFECTED AFTER EACH DIAPER CHANGE.
 - 7. STAFF SHALL VIGOROUSLY CLEAN ALL PARTS OF THEIR HANDS WITH SOAP AND WARM RUNNING WATER, AND DRY THEIR HANDS WITH INDIVIDUAL PAPER OR CLOTH TOWELS AFTER DIAPERING EACH CHILD.
 - 9. DURING CHILD CARE HOURS, CLOTHING SOILED BY BODILY FLUIDS SHALL BE PLACED IN A LEAK PROOF CONTAINER. THE CONTAINER SHALL BE STORED INACCESSIBLE TO CHILDREN AND SENT HOME ON A DAILY BASIS.
- D. CLEANING TOYS

- TOYS THAT ARE NOT MOUTHED OR OTHERWISE CONTAMINATED BY BODY FLUIDS SHALL BE CLEANED AND SANITIZED AT LEAST ONCE A WEEK AND WHENEVER VISIBLY SOILED.
- 2. TOYS THAT ARE PLACED IN CHILDREN'S MOUTHS OR ARE OTHERWISE CONTAMINATED BY BODY FLUIDS SHALL BE CLEANED AND SANITIZED PRIOR TO USE BY ANOTHER CHILD.

7.702.64 Physical Care

Rev. eff. 2/1/05

A. General

- All children must SHALL be under direct AND ACTIVE supervision of a responsible adult QUALIFIED STAFF MEMBER at all times.
- CHILDREN SHALL BE PROVIDED A DEVELOPMENTALLY APPROPRIATE ENVIRONMENT
- 3. CHILDREN'S APPROPRIATE CARE AND WELL-BEING SHALL BE PROVIDED FOR, TAKING INTO CONSIDERATION THE INDIVIDUAL NEEDS OF EACH CHILD.
- 4. CHILDREN SHALL BE PICKED UP APPROPRIATELY AROUND THEIR UPPER CHEST AND UNDER THEIR ARMS, AND BASED ON THE DEVELOPMENTAL NEEDS OF THE CHILD.
- 5. CHILDREN LEAVING THE CENTER FOR SCHOOL OR OTHER OUTSIDE ACTIVITIES SHALL BE DRESSED APPROPRIATELY TO PROTECT THE HEALTH AND SAFETY OF CHILDREN FOR THE WEATHER.
- 6. CHILDREN SHALL BE PROVIDED AN ENVIRONMENT THAT MINIMIZES THE RISK OF CHILDREN HURTING THEMSELVES OR EACH OTHER.
- 7. STAFF, SUBSTITUTES, OR VOLUNTEERS SHALL NOT CONSUME OR BE UNDER THE INFLUENCE OF ANY SUBSTANCE THAT IMPAIRS THEIR ABILITY TO CARE FOR CHILDREN.
- 8. WHEN CARING FOR CHILDREN, STAFF SHALL REFRAIN FROM PERSONAL USE OF ELECTRONICS, INCLUDING BUT NOT LIMITED TO: CELL PHONES, BLACKBERRYS, AND MP3 PLAYERS.
- 9. ILLEGAL DRUGS, INCLUDING DRUG PARAPHENALIA, MARIJUANA, AND ALCOHOL, SHALL NEVER BE PRESENT ON THE PREMISES OF THE CHILD CARE CENTER DURING OPERATING HOURS.
- STAFF SHALL DIRECTLY SUPERVISE AND MONITOR ALL CHILDREN WHILE OUTDOORS. SUPERVISION SHALL INCLUDE MONITORING CHILDREN FOR EXHAUSTION, DISTRESS, SUNBURN, HEATSTROKE, DEHYDRATION, FROSTBITE, AND THREAT OF DROWNING.
- 11. STAFF SHALL RESPOND TO THE IMMEDIATE NEEDS OF A CHILD INCLUDING BUT NOT LIMITED TO: CRYING, TOILETING, HUNGER AND THIRST. THE TIMING OF THE RESPONSE SHALL NOT RESULT IN PHYSICAL HARM TO THE CHILD.
- The time a child arrives and leaves the center each day must SHALL be recorded. Attendance verification must SHALL be

- made/DOCUMENTED periodically throughout the day by staff members at the center.
- 13. THE CENTER SHALL MONITOR THE AFTER SCHOOL CHILDREN TO BE SURE THEY ARRIVE AT THE CENTER WHEN EXPECTED AND FOLLOW UP ON THEIR WHEARABOUTS IF THEY ARE LATE OR DO NOT SHOW UP WHEN EXPECTED.
- 3. 14. The center must provide a rest period for all preschool-age children remaining in the center longer than 4 hours. A rest period and rest equipment must also be provided for older children who require a rest time.
- The center must provide mats or cots and a designated rest period for all preschool age children.
- 16. Drop-in child care centers must provide mats or cots for at least fifty percent (50%) of the licensed capacity of the center.
- 17. Children must not be forced to sleep. Children who do not sleep after a reasonable period of time must be provided with appropriate quiet toys and equipment to play with, such as puzzles or books.
- 15. 5. The center must SHALL ensure that children are dressed appropriately for the weather before going outside.
- 15. SLEEP ROOMS SHALL NOT BE SO DARK THAT ALL CHILDREN ARE NOT EASILY VISIBLE TO STAFF.

B. PHYSICAL ACTIVITY

- CHILDREN SHALL BE PROVIDED AT LEAST SIXTY (60) MINUTES OF INDOOR PHYSICAL ACTIVITY PER DAY. THE ACTIVITIES SHOULD INCLUDE A COMBINATION OF TEACHER LED AND FREE PLAY.
- AT LEAST ONE PROVIDER PARTICIPATES IN ACTIVE PLAY WITH THE CHILDREN AT LEAST ONE TIME PER DAY.
- 3. TELEVISION, VIDEO, AND COMPUTER TIME IS LIMITED TO 20 MINUTES PER DAY UNLESS IT IS A SPECIAL OCCASION.
- 4. TELEVISION AND VIDEO VIEWING SHALL NOT BE ALLOWED FOR CHILDREN UNDER THE AGE OF TWO (2).
- 5 TELEVISION, VIDEO AND COMPUTER TIME SHALL NOT BE AVAILABLE DURING SNACK OR MEAL TIMES.
- 6. ACTIVE PLAYTIME IS NOT WITHHELD FOR GUIDENCE OR DISCIPLINE.
- 7. ALL CHILDREN, INCLUDING THOSE WITH SPECIAL NEEDS, ARE PROVIDED OPPORTUNITIES FOR ACTIVE PLAY EACH DAY.
- 8. OUTDOOR PHYSICAL PLAY SHALL BE PROVIDED TO PRESCHOOL AGE AND OLDER CHILDREN AT LEAST TWO TIMES PER DAY AND FOR NO LESS THAN 60 MINUTES TOTAL PER DAY, WEATHER PERMITTING.

- SHADED AREAS SHALL BE PROVIDED FOR CHILDREN DURING OUTDOOR PLAY.
- 10. PHYSICALLY ACTIVE INDOOR PLAY SHALL BE PROVIDED FOR NO LESS THAN 60 MINUTES PER DAY FOR PRESCHOOL AGE AND OLDER CHILDREN WHEN INCLEMENT WEATHER PROHIBITS OR LIMITS OUTSIDE PLAY.
- 11. CHILD CARE PROVIDERS AND CHILDREN ATTEND AT LEAST ONE PHYSICAL ACTIVITY EDUCATION CLASS PER YEAR.
- 12. WHEN CHILDREN ARE NOT SLEEPING OR EATING, CHILDREN SHALL NOT BE REQUIRED TO BE SEATED FOR TIME PERIODS EXCEEDING 30 MINUTES.
- 13. OUTDOOR PLAYTIME SHALL BE PROVIDED TO TODDLER AGE CHILDREN FOR NO LESS THAN THIRTY (30) MINUTES TOTAL PER DAY, WEATHER PERMITTING.
- 14. PHYSICALLY ACTIVE INDOOR PLAY SHALL BE PROVIDED FOR NO LESS THAN THIRTY (30) MINUTES PER DAY FOR TODDLER AGE CHILDREN WHEN INCLEMENT WEATHER PROHIBITS OR LIMITS OUTSIDE PLAY.
- 15. INFANTS SHALL BE PROVIDED OUTDOOR PLAY AT LEAST 3 TIMES PER WEEK WEATHER PERMITTING.

B. GREETING AND DEPARTURES

- CHILDREN SHOULD BE GREETED INDIVIDUALLY AND PLEASANTLY UPON ARRIVAL AND DEPARTURE
- 2. PARENT(S) OR GUARDIAN(S) SHALL BE ALLOWED ACCESS TO THEIR CHILDREN AND ALL LICENSED AREAS AT ALL TIMES FOR ANY DURATION.
- 3. WHEN NECESSARY, UPON ARRIVAL AND DEPARTURE, THE PARENT OR GUARDIAN AND PROVIDER SHALL SHARE INFORMATION RELATED TO THE CHILD'S HEALTH AND SAFETY INCLUDING, BUT NOT LIMITED TO, SPECIAL DIETS, ACCIDENT REPORTS, SPECIFIC FEARS, AND FAMILY TRAUMAS.
- 4. INFANT SCHEDULES INCLUDING FEEDING, DIAPERING AND SLEEPING SHALL BE DOCUMENTED WHEN THE EVENT OCCURS.
- 5. INFANT WRITTEN SCHEDULES SHALL BE PROVIDED TO PARENTS/GUARDIANS ON A DAILY BASIS.
- 6. TODDLER SCHEDULES INCLUDING FEEDING, DIAPERING AND SLEEPING SHALL BE PROVIDED TO PARENTS/GUARDIANS EITHER VERBALLY OR IN WRITING.

B.C. Infant and Toddler Nurseries

1. The staff must have daily contact with adults who transport the infants and toddlers to and from the center. ALL INFANT AND TODDLER PROGRAMS SHALL HAVE ASSIGNED CAREGIVING.

- A. EACH CHILD SHALL HAVE ONE (1) STAFF MEMBER WHO IS THEIR ASSIGNED CAREGIVER. THIS DOES NOT MEAN THAT OTHER STAFF CANNOT PROVIDE CARE FOR THIS CHILD OR THAT THIS STAFF MEMBER CANNOT PROVIDE CARE FOR OTHER CHILDREN IN THE ROOM.
- B. PARENTS OR GUARDIANS SHALL BE MADE AWARE OF WHOM THEIR CHILD'S ASSIGNED CAREGIVER IS.
- C. THE ASSIGNED CAREGIVE IS RESPONSIBLE FOR KNOWING AND ENSURING THE CHILD'S SCHEDULE IS FOLLOWED...
- D. THE ASSIGNED CAREGIVER IS RESPONSIBLE FOR ENSURING COMMUNICATION BETWEEN STAFF AND PARENTS OCCUR.
- E. SUBSTITUTES WORKING IN INFANT AND TODDLER ROOMS SHALL BE TOLD WHICH CHILDREN THEY WILL BE ASSIGNED.
- CRIBS, COTS, MATS, SHALL BE USED FOR SLEEPING NOT EXTENDED PLAY OR CONFINEMENT.
- **2.3.** Children WHO ARE AWAKE must SHALL not be confined for prolonged periods MORE THAN TWENTY (20) MINUTES AT A TIME of time to cribs, playpens, swings, high chairs, infant seats, or other equipment that INHIBITS FREEDOM OF MOVEMENT, UNLESS THEY ARE EATING.
- XX INFANTS WHO FALL ASLEEP IN A SWING OR OTHER SEAT SHALL BE TRANSITIONED TO THEIR APPROVED SLEEP AREA WITHIN TEN (10) MINUTES
- 4. CONFINEMENT SHALL NEVER BE USED AS A FORM OF DISCIPLINE.confines movement. They must have an opportunity each day for freedom of movement, such as creeping, crawling, or walking in a safe, clean, open, uncluttered area.
- 3.4. Throughout the day, each child must SHALL have frequent, individual, personal contact and attention from THEIR ASSIGNED CAREGIVER. CONTACT SHALL INCLUDE BUT NOT BE LIMITED TO: an adult, such as being held, rocked, taken on walks inside and outside the center, talked to, and sung to.
- 4. There must be no attempt to toilet train children under the age of 18 months.
- 5. Staff must investigate whenever children cry.
- 45. INFANTS AND TODDLERS SHALL Children must be allowed to form and observe their own pattern of sleep and waking periods. Special provisionS must SHALL be made so that children requiring a morning nap time have a separate area for their nap apart from space used for play.
- 6. CLOTHING WORN BY INFANT NURSERY STAFF MEMBERS TO AND FROM WORK SHALL BE COVERED BY OR REPLACED WITH A CLEAN, COMFORTABLE, NON-IRRITATING, AND WASHABLE SMOCK OR SIMILAR CLOTHING THAT COVERS THE LAP AND SHOULDER AREAS.

- 57. Infant monitors may SHALL be used in separate sleeping rooms for infants under the following conditions:
 - a. The sound monitoring equipment is able to pick up the sounds of all sleeping infants. Additional equipment must SHALL be provided as necessary to provide ENSURE adequate coverage.
 - b. The receiver of the sound monitoring equipment is actively monitored by staff at all times.
 - c. ALL Sleeping infants are SHALL BE physically monitored EVERY FIFTEEN (15) MINUTES/ and periodically checked by a staff member.
 - d. Sound monitoring equipment SHALL BE is regularly checked to assure that it is working correctly.
- 6. EACH INFANT SHALL BE PROVIDED WITH AN INDIVIDUAL CRIB, FUTON APPROVED FOR INFANTS, OR OTHER APPROVED SLEEP/REST EQUIPMENT THAT MEETS CURRENT NATIONALLY RECOGNIZED SAFETY STANDARDS.
- 7. ALL SLEER/REST EQUIPMENT SHALL BE SAFE, STURDY, AND FREE FROM HAZARDS INCLUDING, BUT NOT LIMITED TO: BROKEN OR LOOSE SIDES, CHIPPING PAINT OR LOOSE SCREWS. SPACE BETWEEN CRIB SLATS SHALL BE NO WIDER THAN TWO AND THREE-EIGHTS (2 3/8") INCHES OR ACCORING WITH THE CURRENT NATIONALLY RECOGNIZED SAFETY STANDARDS
- 8. CRIB MATTRESSES SHALL FIT SNUGLY ENOUGH THAT NO MORE THAN TWO FINGERS ARE ABLE TO BE INSERTED BETWEEN THE MATTRESS AND CRIB.
- 9. HANGING TOYS IN CRIBS ARE PROHIBITED FOR INFANTS SIX (6) MONTHS OLD AND OLDER OR IF THE INFANT IS ABLE TO SIT UP OR GET ONTO THEIR KNEES.
- 8. TODDLERS SHALL BE PROVIDED WITH A TWO (2) INCH THICK MAT, COT OR OTHER APPROVED SLEEP/REST EQUIPMENT MEETING CURRENT NATIONALLY RECOGNIZED SAFETY STANDARDS.
- 10. STACKING CRIBS, BASSINETS, DROPSIDECRIBS AND PLAYPENS ARE PROHIBITED.
- 11. OTHER SLEEP EQUIPMENT THAT HAS NOT BEEN MANUFACTURED FOR COMMERCIAL USE IS PROHIBITED.
- D. PRESCHOOL AND SCHOOL-AGE PROGRAMS
 - The center must SHALL provide a rest period, WITH REST EQUIPMENT for all preschool-age children remaining in the center longer than 4 hours. All preschool-age children SHALL BE GIVEN A QUIET REST PERIOD FOR AT LEAST THIRTY (30) MINUTES ON THEIR COT.

- A rest period and rest equipment must SHALL also be provided for older children who require a rest time.
- 3. CHILDREN SHALL NOT BE FORCED TO SLEEP. CHILDREN WHO DO NOT SLEEP AFTER THIRTY (30) MINUTES SHALL BE ALLOWED TO MOVE TO ANOTHER AREA AND BE PROVIDED WITH APPROPRIATE QUIET TOYS AND EQUIPMENT TO PLAY WITH SUCH AS PUZZLES OR BOOKS.
- 4. CHILDREN SHALL BE ALLOWED TO LEAVE THEIR NAPPING AREA WITHIN TEN (10) MINUTES OF WAKING.
- 5. The center must provide mats or cots and a designated rest period for all preschool——age children.—TODDLERS, PRESCHOOLERS, AND OLDER CHILDREN, AS NECESSARY, SHALL HAVE A SUITABLE MAT NOT LESS THAN TWO INCHES THICK OR COT, OR OTHER APPROVED SLEEPING/REST EQUIPMENT WITH A CLEAN WASHABLE SHEET THAT HAS BEEN SANITIZED BETWEEN USES BY DIFFERENT CHILDREN. CHILDREN SHALL BE PROVIDED WITH A CLEAN BLANKET.
- 6.4. Drop-in child care centers must SHALL provide mats or cots for at least fifty percent (50%) of the licensed capacity of the center. Children must not be forced to sleep. Children who do not sleep after a reasonable period of time must be provided with appropriate quiet toys and equipment to play with, such as puzzles or books.

7.702.65 Food and Nutrition

Rev. eff. 10/1/03

A. Meals and Snacks

- 1. A VARIETY OF NUTRITIOUS meals and nutritious MORNING AND AFTERNOON snacks must SHALL be served OFFERED at suitable intervals. Children who are at the center for more than FOUR (4) hours, day or evening, must SHALL be offered a meal that meets at least one-third (1/3) of the child's daily nutritional needs. AS REQUIRED BY THE USDA CHILD AND ADULT CARE FOOD PROGRAM (CODE OF FEDERAL REGULATIONS 226 FIX CITATION) MEAL PATTERN REQUIREMENTS.
- 2. ARRANGEMENTS SHALL BE MADE FOR FEEDING CHILDREN WHO ARE IN CARE BEFORE 6:00 AM OR AFTER 6:00 PM.
- The size of servings must be suitable for the child's age and appetite, and sufficient time must be allowed so that meals are unhurried.
- 3. FOOD SHALL BE OFFERED TO CHILDREN WHEN THEY ARE AWAKE AT INTERVALS NOT MORE THAN THREE (3) HOURS APART.
- 4. A WIDE VARIETY OF FOODS, INCLUDING FRESH FRUITS AND VEGETABLES AND WHOLE GRAIN PRODUCTS SHALL BE PROVIDED TO CHILDREN TO ENSURE ADEQUATE INTAKE OF DIETARY FIBER, VITAMINS, MINERALS, AND OTHER IMPORTANT NUTRIENTS.
- 5. IF THE CENTER DOES NOT REGULARLY PROVIDE MEALS, THE CENTER SHALL SUPPLEMENT CHILDREN'S MEALS THAT ARE INADEQUATE WITH FOODS TO MEET THE USDA CHILD AND ADULT

- CARE FOOD PROGRAM (CODE OF FEDERAL REGULATIONS 226FIX CITATION) MEAL PATTERN REQUIREMENTS.
- 6. PROVIDERS AND PARENTS SHALL HAVE ONGOING COMMUNICATION REGARDING SPECIAL DIETS AND FEEDING NEEDS OF THE CHILDREN.
- 7. FOODS OFFERED SHALL BE AGE APPROPRIATE AND NOT POSE A CHOKING HAZARD.
- 8. CHILDREN ARE ENCOURAGED, BUT NOT FORCED, TO EAT FOOD OR DRINK FLUIDS.
- 9. MEALS AND SNACKS CAN BE TEMPORAIRLY POSTPONED OR PROVIDED INDIVIDUALLY, BUT DEPRIVATION OF MEALS, SNACKS AND BEVERAGES SHALL NOT BE USED AS PUNISHMENT.
- MEALS, SNACKS AND BEVERAGES ARE NOT TO BE USED AS A REWARD.
- CHILDREN WITH SPECIAL NEEDS ARE INCLUDED IN REGULAR MEAL AREAS AND ROUTINES.
- 12. ALL MILK AND JUICE OFFERED TO CHILDREN SHALL BE PASTEURIZED.
- 13. CHILDREN OLDER THAN TWO YEARS SHALL BE SERVED ONE PERCENT (1%), TWO PERCENT (2%) OR SKIM REDUCED FAT MILK UNLESS DIRECTED IN WRITING BY THE CHILD'S HEALTH CARE PROVIDER.
- 14. JUICE SHALL BE LIMITED TO ONE (1) FOUR-SIX (4-6) OUNCE SERVING OR LESS PER DAY FOR CHILDREN OVER ONE YEAR OF AGE. ONLY ONE HUNDRED PERCENT (100%) JUICE WITHOUT SUGAR SWEETENERS OR SUGAR SUBSTITUTES SHALL BE SERVED.
- 15. SUGAR SWEETENED OR SUGAR SUBSTITUTE BEVERAGES SHALL NOT BE SERVED. SWEET TYPE FOODS SHALL BE LIMITED TO NO MORE THAN TWO (2) SERVINGS PER WEEK.
- 16. CLEAN AND SANITARY DRINKING WATER SHALL BE OFFERED OR MADE AVAILABLE FOR CHILDREN TO SERVE THEMSELVES AT ALL TIMES AND SHALL NOT BE A SUBSTITUTE FOR MILK DURING MEALS.
- 17. FOOD SHALL BE OFFERED TO THE CHILD FROM THE CHILD'S INDIVIDUAL DISH AND UTENSIL(S). IF UNEATEN PORTION(S) FROM THE CHILD'S PLATE IS SAVED, IT SHALL BE REFRIGERATED AND STORED SAFELY AND SHALL BE SERVED, EATEN OR DISCARDED WITHIN FOUR (4) HOURS OF BEING PREPARED.
- 3. In centers that do not regularly provide a meal, if a child brings a meal from home that does not appear to meet one third of the child's daily nutritional needs, the center must have foods available to supplement that meal.

- 4. 18. AT LEAST ONE Sstaff members must SHALL sit, HAVE A PLATE REFLECTIVE OF WHAT THE CHILDREN ARE EATING IN FRONT OF THEM. THE STAFF MEMBER SHALL HAVE SOCIAL CONVERSATION with the children DURING MEALS and encourage them to try a variety of food served. During meals, children should be encouraged to engage in conversation and to express their independence.
- 5. 19. All food prepared by the center must SHALL be from sources approved by the local health department or the State Department of Public Health and Environment. All food must SHALL be prepared, served, and stored in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption.
 - A. Home-canned vegetables, fruits, and meats cannot be served.
 - B. FOOD PREPARED IN A PRIVATE HOME SHALL NOT BE USED, SERVED OR OFFERED FOR SALE.
 - C. FOOD PROVIDED BY PARENTS OR GUARDIANS FOR THEIR INDIVIDUAL CHILD/REN FOR MEALS AND SNACKS CAN BE SERVED ONLY TO THE CHILD FOR WHICH IT WAS PROVIDED.
- 6- 20. Meal menus must SHALL be planned at least one (1) week in advance, dated, and posted in a place visible to parents. ANY FOOD SUBSTITUTION SHALL BE OF COMPARABLE FOOD VALUE AND RECORDED ON THE MENU. After use, menus must SHALL be filed and retained for three (3) months. Records must SHALL be available for periodic review and evaluation.
- 21. CHILDREN SHALL NOT BE GIVEN FOODS THAT ARE CONTRARY TO THE RELIGIOUS BELIEFS OF THEIR FAMILIES OR THAT ARE KNOWN TO CAUSE AN ALLERGIC REACTION, SENSITIVITY OR A HEALTH HAZARD.
- 22. LIMIT FOODS THAT ARE HIGH IN SUGAR, SALT, SATURATED FAT AND TRANS FAT TO LESS THAN ONE (1) TIME PER WEEK.
- 23. NUTRITION EDUCATION IS OFFERED TO CHILD CARE STAFF AT LEAST ONE (1) TIME PER YEAR AND TO CHILDREN AT LEAST THREE (3) TIMES PER YEAR.

B. Feeding the Infant AND TODDLER

- 1. An individualized diet and feeding schedule FOR INFANTS must SHALL be provided according to a written plan submitted by the parent OR GUARDIAN or by the child's physician HEALTH CARE PROVIDER with the knowledge and consent of the parent. A change of diet and schedule must SHALL be noted on each child's daily activity schedule and posted in an area clearly visible to the nursery staff. WHAT AN INFANT EATS SHALL BE NOTED ON EACH CHILD'S DAILY ACTIVITY SCHEDULE.
- 2. CHILDREN SHALL BE FED IN SAFE CHAIRS SUCH AS INFANT/TODDLER SIZE TABLES AND CHAIRS OR HIGH CHAIRS. INFANT/TODDLER SIZED TABLES AND CHAIRS, HIGH CHAIRS OR OTHER SUITABLE PIECES OF EQUIPMENT SHALL BE PROVIDED FOR INFANT AND TODDLER FEEDING.

- 2. Commercially prepared formula must be mixed according to the manufacturer's direction.
- 3. Staff members must SHALL either feed toddlers or ACTIVELY supervise them when they are eating and children must be encouraged to try a variety of food served. A STAFF MEMBER SHALL BE SEATED WITH THE CHILDREN AT THE TABLE.
- 4. CHILDREN SHALL BE OFFERED A VARIETY OF FOOD SERVED FROM THEIR APPROVED DIET.
- 5. INFANTS SHALL BE FED ON DEMAND OR ACCORDING TO A FEEDING SCHEDULE PROVIDED BY THE INFANTS HEALTH CARE PROVIDER AND PARENT.
- 6. TODDLERS SHALL BE TRANSITIONED TO A REGULAR FEEDING SCHEDULE AGREED UPON BY THE CHILD'S PARENTS.

C. BOTTLES AND FORMULA

- 1. HUMAN MILK SHALL BE THAWED BETWEEN THIRTY-TWO (32)
 DEGREES AND ONE-HUNDRED-TWENTY (120) DEGREES AND A
 THERMOMETER SHALL BE MAINTAINED TO ENSURE
 TEMPERATURE.
- 2. WATER USED TO WARM BOTTLES SHALL NOT EXCEED ONE-HUNDRED-TWENTY (120) DEGREES FAHRENHEIT AND A THERMOMETER SHALL BE MAINTIANED TO ENSURE TEMPERATURE.
- 7. 3. Bottles of formula or HUMAN breast milk must SHALL never be warmed OR THAWED in a microwave oven.
- 4. INFANT FORMULA AND HUMAN MILK SHALL NOT BE REUSED. IF A CHILD DOES NOT FINISH THE BOTTLE OF FORMULA OR HUMAN MILK WITHIN ONE (1) HOUR, THE CONTENTS SHALL BE THROWN OUT.
- 5. BREAST FED INFANTS SHALL NOT BE OFFERED FORMULA, WATER, OR OTHER LIQUIDS WITHOUT DISCUSSING SUBSTITUTIONS OR SUPPLEMENTATION WITH THE INFANT'S PARENT.
- 6. AN AREA IN THE CENTER SHALL BE PROVIDED FOR BREAST FEEDING OR HUMAN MILK EXPRESSION DURING BUSINESS HOURS.
- 3.7. All infants under 6 months of age UNABLE TO HOLD THEIR OWN BOTTLES must SHALL be held BY THE PROVIDER for DURING bottle feedings.

- 8. INFANTS SHOULD BE HELD SO THEY ARE ABLE TO SEE THE FACE OF THE PROVIDER IF APPROPRIATE FOR THE CHILD.
- 93. Bottles must-SHALL not be propped. Older infants must not be allowed to hold their own bottles when lying flat. Bottles OR SIPPIE CUPS must SHALL not be allowed in a crib, FUTON, OR OTHER APPROVED SLEEPING EQUIPMENT with the infant.
- 10. TO PREVENT CHOKING, EAR INFECTIONS, BOTTLE MOUTH OR TOOTH DECAY, INFANTS AND TODDLERS SHALL NOT BE ALLOWED TO HOLD THEIR OWN BOTTLES OR SIPPIE CUPS WHEN LYING FLAT.
- 11. INFANTS HAVING FORMULA, HUMAN MILK, MILK OR WATER IN A BOTTLE OR SIPPY CUP SHALL BE DIRECTLY AND ACTIVELY SUPERVISED. THE BOTTLE OR SIPPY CUP SHALL BE REMOVED WHEN THE CHILD IS DONE DRINKING AND CHILDREN SHALL NOT BE ALLOWED TO HAVE BOTTLES OR SIPPY CUPS WHILE WALKING AROUND OR ACTIVELY PLAYING.
- 7. 12. There must SHALL be a sufficient supply of bottles provided for the entire day; or if nursing bottles are to be reused, they must SHALL be washed, rinsed, and sanitized after each use.
- 13. FOODS AND BOTTLES SHALL NOT BE SHARED AMONG CHILDREN.
- 2.14. Commercially prepared formula must SHALL be mixed according to IN ACCORDANCE WITH THE DIRECTIONS OF the manufacturer's direction OR THE CHILD'S HEALTH CARE PROVIDER.
- 8. A staff member may not mix cereal with formula and feed it to an infant from a bottle or infant feeder unless there are written instructions from the child's health care provider.
- 15. FORMULA, HUMAN MILK, OR ANY OTHER FLUID SHALL NOT BE MIXED WITH CEREAL AND SERVED IN A BOTTLE UNLESS THERE ARE WRITTEN INSTRUCTIONS FROM THE CHILD'S HEALTH PROVIDER.
- 16. EACH BOTTLE SHALL BE MARKED WITH THE CHILD'S FIRST AND LAST NAME.

D. SOLID FOODS

- 1. AT A MINIMUM, MEALS AND SNACKS PROVIDED FOR INFANTS UNDER THE AGE OF ONE (1) YEAR SHALL CONTAIN THE FOODS LISTED IN THE USDA CHILD AND ADULT CARE FOOD PROGRAM MEAL PATTERN FOR INFANTS.
- 2. FOODS SHALL BE APPROPRIATE FOR INFANTS' DEVELOPMENTAL STAGES AS DETERMINED BY INSTRUCTIONS OBTAINED FROM THE INFANT'S PARENT(S), GUARDIAN(S), OR HEALTH CARE PROVIDER.

- 4.3, Older infants must SHALL be provided with suitable solid foods that encourage freedom in self-feeding and must SHALL be fed in safe chairs such as high chairs or baby-feeding tables.
- 5. When the infant nursery provides food other than formula, food must be varied and include food from cereal, vegetable, fruit, and protein sources. When the center does not provide solid food, it must supply any additional foods and/or monitor the infant's total nutritional intake.
- 6.4. When the center does not provide solid food, it must SHALL supply any additional foods and/or monitor the infant's total nutritional intake. NECESSARY TO SUPPLEMENT THE INFANT'S TOTAL NUTRITIONAL INTAKE.
- 5. NO NEW FOODS SHALL BE INTRODUCED TO CHILDREN UNDER TWELVE (12) MONTHS OF AGE WITHOUT PARENTAL PERMISSION.
- 6. INFANTS AND TODDLERS WHO ARE EATING SOLID FOODS SHALL BE PROVIDED WITH DEVELOPMENTALLY APPROPRIATE SOLID FOODS THAT ENCOURAGE FREEDOM IN SELF-FEEDING.
- 7. PROVIDER(S) SHALL EITHER FEED INFANTS AND TODDLERS OR DIRECTLY SUPERVISE THEM WHILE THEY ARE EATING.
- 8. HONEY AND PRODUCTS CONTAINING HONEY SHALL NEVER BE SERVED TO INFANTS UNDER TWELVE (12) MONTHS OF AGE.
- 9. NO MILK OTHER THAN HUMAN MILK OR FORMULA SHALL BE GIVEN TO INFANTS BEFORE TWELVE (12) MONTHS OF AGE UNLESS DIRECTED IN WRITING BY THE INFANTS HEALTH CARE PROVIDER.

C. Feeding the Toddler 1. Staff members must either feed toddlers or supervise them when they are eating, and children must be encouraged to try a variety of food served. 2. Toddlers must be sitting when drinking from a bottle. Bottles must not be allowed during nap time after the first 30 days in care. 3. Commercially prepared formula must be mixed according to the manufacturer's direction and each bottle marked with the child's name. 4. There must be a sufficient supply of bottles provided for the entire day; or if nursing bottles are to be reused, they must be washed, rinsed, and sanitized after each use.

7.702.66 Discipline GUIDANCE PRACTICES

- A. AT THE TIME OF ADMISSION, THE CENTER SHALL DISCUSS WITH THE PARENT OR GUARDIAN THE CENTER'S GUIDANCE EXPECTATIONS AND CONSEQUENCES OF A CHILD'S BEHAVIOR.
- B. GUIDANCE SHALL BE APPROPRIATE TO THE DEVELOPMENTAL AGE OF THE CHILD, CONSTRUCTIVE OR EDUCATIONAL IN NATURE, AND SHALL INCLUDE SUCH MEASURES AS DIVERSION, SEPARATION, TALKING WITH THE CHILD ABOUT THE SITUATION, PRAISE FOR APPROPRIATE BEHAVIOR, AND GENTLE HOLDING.
- C. PROVIDERS SHALL MODEL AND SUPPORT CHILDREN IN THE USE OF APPROPRIATE WORDS AND ACTIONS.

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- A. D. Children must SHALL not be subjected to physical, or emotional harm or humiliation. PROVIDERS SHALL NOT USE, OR PERMIT ANYONE ELSE TO USE, CORPORAL OR OTHER HARSH PUNISHMENT, INCLUDING BUT NOT LIMITED TO, PINCHING, SHAKING, SPANKING, PUNCHING, BITING, KICKING, ROUGH HANDLING, HAIR PULLING, OR ANY HUMILIATING OR FRIGHTENING METHOD OF DISCIPLINE.
- E. MEALS AND SNACKS CAN BE TEMPORAIRLY POSTPONED OR PROVIDED INDIVIDUALLY, BUT DEPRIVATION OF MEALS, SNACKS AND BEVERAGES SHALL NOT BE USED AS PUNNISHMENT. MEALS, SNACKS AND BEVERAGES SHALL NOT BE USED AS A REWARD.
- F. PHYSICAL, MECHANICAL, AND CHEMICAL RESTRAINT SHALL NEVER BE USED.

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- B. The director must not use, or permit a staff person or child to use, corporal or other harsh punishment, including but not limited to pinching, shaking, spanking, punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of discipline.
- G.C. Discipline GUIDANCE must SHALL not be associated with food, rest or toileting. No child should be punished for toileting accidents. CHILDREN SHALL NOT BE PUNISHED FOR NOT RESTING OR SLEEPING, TOILETING ACCIDENTS, FAILURE TO EAT ALL OR PART OF MEALS OR SNACKS, OR FAILURE TO COMPLETE AN ACTIVITY. Food OR DRINK must SHALL not be denied to or forced upon a child as a disciplinary measure.
- D. Separation, when used as discipline, GUIDANCE must SHALL be brief and appropriate for the child's age, AND CIRCUMSTANCES. The child must SHALL be in a safe, lighted, well-ventilated area, ACTIVELY SUPERVISED, and—be within sight and hearing of an QUALIFIED STAFF MEMBER adult. The child must SHALL BE IN AN UNLOCKED OPEN AREA AND SHALL not be isolated in a locked, closed room or closet.
- E. Verbal OR EMOTIONAL abuse and derogatory remarks about the ANY child AND/OR ANY CHILD'S FAMILY AND HOME ENVIRONMENT IS PROHIBITED. are not permitted.
- J. AUTHORITY TO DISCIPLINE SHALL NOT BE DELEGATED TO ANY NON STAFF MEMBER OR OTHER CHILDREN. PROVIDERS SHALL NOT SANCTION ONE (1) CHILD PUNISHING ANOTHER CHILD.
- K. A CHILD SHALL NOT BE PUNISHED FOR THE ACTIONS OF A PARENT OR GUARDIAN. THIS INCLUDES, BUT IS NOT LIMITED TO, FAILURE TO PAY FEES, FAILURE TO PROVIDE APPROPRIATE CLOTHING, FAILURE TO

PROVIDE MATERIALS FOR AN ACTIVITY, OR ANY CONFLICT BETWEEN THE PROVIDER AND THE PARENT OR GUARDIAN.

- L. THE CENTER SHALL HAVE A POLICY ON GUIDANCE, POSITIVE INSTRUCTION, DISCIPLINE AND CONSEQUENCES THAT INCLUDES HOW THE CENTER WILL:
 - CULTIVATE POSITIVE CHILD, STAFF, AND FAMILY RELATIONSHIPS, AND CREATING AND MAINTAINING SOCIALLY AND EMOTIONAL RESPECTFUL EARLY CARE AND LEARNING ENVIRONMENTS.
 - 2. IMPLEMENT TEACHING STRATEGIES THAT SUPPORT POSITIVE BEHAVIOR AND PROSOCIAL PEER INTERACTION AND OVERALL SOCIAL AND EMOTIONAL COMPETENCE IN YOUNG CHILDREN.
 - 3. PROVIDE INDIVIDUALIZED SOCIAL AND EMOTIONAL INTERVENTION SUPPORTS FOR CHILDREN WHO NEED THEM THAT INCLUDE METHODS FOR ASSESSING THE MEANING OF CHILD BEHAVIOR AND DEVELOPING, ADOPTING AND IMPLEMENTING A TEAM-BASED (I.E., FAMILY, PROGRAM ADMINISTRATOR, TEACHER, DEVELOPMENT SPECIALIST, CONSULTANT, ETC.) POSITIVE BEHAVIOR SUPPORT PLAN.
 - 4. HAVE A FEASIBLE PLAN TO ACCESS AN EARLY CHILDHOOD MENTAL HEALTH CONSULTANT OR OTHER SPECIALIST AS NEEDED.
 - M. THE CENTER SHALL HAVE PROCEDURES IN PLACE, AND SHALL INDICATE STEPS THAT THE DIRECTOR WILL TAKE PRIOR TO WITHDRAWAL, EXPULSION OR SUSPENSION FROM CARE IN INSTANCES OF SOCIAL, EMOTIONAL OR BEHAVIORAL CHALLENGE THAT ARE CONSISTENT WITH THE CENTER'S POLICY ON GUIDANCE, POSITIVE INSTRUCTION, DISCIPLINE AND CONSEQUENCES.

7.702.67 Overnight Care

A. OVERNIGHT CARE MUST SHALL BE APPROVED AND DOCUMENTED ON THE CHILD CARE LICENSE. OVERNIGHT CARE SHALL NOT BE PROVIDED WITHOUT THIS APPROVAL.

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All of the provisions required in Section 7.702 of these rules for child care centers apply to centers offering overnight care of children (care that extends through a large portion of the night), WHICH INCLUDES CARE EXTENDING BEYOND MIDNIGHT. In addition, centers must SHALL observe the following provisions:

- B1. A nutritious evening meal MEETING THE USDA CHILD AND ADULT CARE FOOD PROGRAM (CODE OF FEDERAL REGULATIONS 226FIX CITATION) MEAL PATTERN REQUIREMENTS SHALL be made available OFFERED to children.
- XX ALL REGULATIONS REGARDING FOOD AND NUTRITION SHALL BE FOLLOWED.

- C2. Quiet activities must SHALL immediately precede the children's bedtime.
- D3. Children's faces and hands must be washed, and children must be changed into comfortable clothing for sleeping.
- E3. Each child must SHALL be provided with a comfortable separate bed, crib, FUTON, or cot suitable for the child's age or a TWO (2)-inch sleeping mat or mattress MEETING REQUIREMENTS FOR SLEEP/REST EQUIPMENT.
- Xx Each child must SHALL also be provided with CLEAN sheets, BLANKET, and a clean, washable, AND REMOVABLE covering. PILLOWS SHALL BE AVAILABLE TO A CHILD IF NEEDED. If mats or mattresses are used, the room temperature at floor level must be 68 to 72 degrees. Pads and mattresses must SHALL be fitted with a clean, washable, removable covering.
- Xx Permission of parents or guardians must SHALL be obtained for each child who uses a sleeping mat or mattress placed on the floor.
- 4. NO PROVIDER SHALL KNOWINGLY ALLOW A CHILD TO SLEEP IN A WET BED.
- 5. CHILDREN'S FACES AND HANDS SHALL BE WASHED, TEETH BRUSHED, AND CHILDREN SHALL CHANGE INTO COMFORTABLE CLOTHING FOR SLEEPING. EXTRA SLEEPWEAR SHALL BE AVAILABLE IN THE EVENT THAT A CHANGE IS NECESSARY.
- All children must be directly supervised at all times. STAFF SHALL BE AWAKE AT ALL TIMES AND CHILDREN WILL BE ACTIVELY SUPERVISED AT ALL TIMES.
- 7. G. The staff-child ratio for sleeping children is A MINIMUM OF TWO (2) STAFF ON DUTY AT ALL TIMES. A RATIO OF 1:5 FOR MIXED AGES IF CHILDREN UNDER TWO ARE PRESENT; OR RATIO OF YOUNGEST CHILD WILL APPLY FOR GROUPS OF CHILDREN OVER TWO (2) YEARS OF AGE. CHILDREN SHALL BE CARED FOR IN A COMMON ROOM THAT HAS BEEN APPROVED. 1 adult when 6 or fewer children are in attendance and 2 adults when 7 to 12 children are in attendance, plus 1 adult for each additional 6 or fewer children.

7.702.68 Activities

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A. LEARNING Activity IES Schedules

GENERAL ACTIVITES

- 1. DAILY SCHEDULE SHALL BE POSTED IN EACH CLASSROOM AND FOLLOWED.
- SCHEDULE SHALL REFLECT WHAT GENERALLY OCCURS DAILY AND IS UPDATED TO REFLECT CHANGES.
- 3. MODIFICATIONS TO SCHEDULE ARE MADE TO ENSURE ALL CHILDREN, INCLUDING THOSE WITH SPECIAL NEEDS ARE ABLE TO PARTICIPATE IN ACTIVITIES.

- 4. CHILDREN SHALL NOT BE REQUIRED TO PARTICIPATE IN AN ACTIVITY AND SHALL HAVE AT LEAST TWO (2) OTHER ACTIVITIES AVAILABLE TO CHOOSE FROM WITHOUT A NEGATIVE RESPONSE FROM STAFF.
- 5. STAFF SHALL INITIATE AT LEAST ONE (1) MUSIC ACTIVITY DAILY THAT INCLUDES SOMETHING IN ADDITION TO SINGING, SUCH AS MOVEMENT, RECORDING, INSTRUMENTS ETC.
- 6. AT LEAST ONE (1) PROVIDER-INITIATED LANGUAGE ACTIVITY SHALL BE OFFERED DAILY, SUCH AS IN READING, STORY TELLING, FLANNEL BOARDS OR PUPPETRY.
- 7. THE PROVIDER(S) SHALL INITIATE AT LEAST ONE (1) INTERACTIVE MUSICAL ACTIVITY WEEKLY, SUCH AS SINGING, DANCING, PLAYING INSTRUMENTS, MARCHING, LISTENING TO TAPES OR RECORDINGS, RADIOS AND MUSICAL VIDEOS.
- 6. ACTIVITIES SHALL BE AVAILABLE TO THE CHILDREN THAT ARE CULTURALLY SENSITIVE AND REPRESENT DIVERSITY IN ETHNICITY, RACE, GENDER, AND AGE. VARIETY SHALL EXIST IN TOYS, BOOKS, AND PICTURES.
- 8. BOYS AND GIRLS SHALL NOT BE RESTRICTED TO SPECIFIC ROLES IN PLAY.

PRESCHOOL AND SCHOOL AGE CHILDREN

- POSTED DAILY SCHEDULE REFLECTS AT LEAST ONE (1) HOUR PER DAY OF FREE PLAY INSIDE AND ONE (1) HOUR PER DAY OF OUTDOOR PLAY.
- 2. GROSS MOTOR AND LESS ACTIVE PLAY OCCUR DAILY.
- ART ACTIVITIES SHALL BE PROVIDED DAILY.
 - A. TEACHER DIRECTED ART PROJECTS SHALL BE KEPT TO A MINIMUM AND CHILDREN SHALL BE ALLOWED TO CREATE INDIVIDUALIZED ART WORK.
 - B. ART MATERIALS SHALL BE ACCESSIBLE TO CHIDREN AT LEAST ONE (1) HOUR PER DAY
- 3. SAND AND OR WATER PLAY SHALL BE OFFERED AT LEAST ONE (1) TIME PER WEEK EITHER INDOOR OR OUTDOOR.
- 4. SCHEDULES FOR PART DAY PROGRAMS SHALL REFLECT AT LEAST TWENTY (20) MINUTES PER DAY OF FREE PLAY INSIDE AND TWENTY (20) MINUTES PER DAY OF OUTDOOR PLAY.

INFANT AND TODDLER

- 1. POSTED DAILY SCHEDULE REFLECTS ONE (1) HOUR OF FREE PLAY DAILY. THIS SHALL BE A COMBINATION OF INDOOR AND OUTDOOR PLAY.
- 2. FINE MOTOR ACTIVITIES ARE ACCESSIBLE TO INFANTS AND TODDLERS MUCH OF THE DAY.

- 3. INFANTS AND TODDLERS SHALL HAVE OPEN FREE SPACE FOR ACTIVE PLAY, CRAWLING, LEARNING TO WALK ACCESSIBLE TO THEM MUCH OF THE DAY.
- 4. AGE AND DEVELOPMENTALLY APPROPRIATE EQUIPMENT AND MATERIALS FOR ACTIVE PLAY SHALL BE AVAILABLE DAILY.
- 5. ART ACTIVITIES SHALL BE PROVIDED FOR CHILDREN TWELVE (12) MONTHS AND OLDER AT LEAST THREE (3) TIMES PER WEEK.

1. The center must carry out a planned program suitable to the needs of the children. This program must be described in writing and be available for review when requested by the department or by parents or guardians of children in care.

GENERAL CARGIVING PRACTICES

- TALKING WITH CHILDREN IS GENERALLY SOCIAL AND NOT LIMITED TO ONLY CUSTODIAL OR CONTROL SPEECH.
- 2. CHILDREN SHALL BE ENCOURAGED TO RELATE TO OR COMMUNICATE WITH EACH OTHER AND WITH ADULTS USING DEVELOPMENTALLY APPROPRIATE BEHAVIOR.
- PROVIDER(S) SHALL RESPOND TO CHILDREN'S ATTEMPTS TO COMMUNICATE, USING CULTURALLY SENSITIVE EYE CONTACT AND MAKING AN EFFORT TO CREATE TWO-WAY CONVERSATION.
- 4. PROVIDER(S) SHALL ENCOURAGE INDIVIDUAL EXPRESSION AND ADULT DIRECTED PROJECTS SHALL BE KEPT TO A MINIMUM, AND CHILDREN'S WORK IS VARIED AND INDIVIDUAL.
- 11. 2. The program must SHALL include outdoor play each day except when the severity of weather, including temperature extremes, makes it a health hazard or when a child must SHALL remain indoors due to health reasons.
- 12. 3. If the center takes children on routine short excursions, such activities and locations must SHALL be posted at the center.
- 13. 4. If a child participates in activities away from the facility, the center must SHALL obtain the parent or guardian's written permission for the child to participate in the activity at a specific location and day. Staff ratios found at Section 7.702.55 must SHALL be maintained.
- 14. 5. Television viewing, including videos, should not ONLY be permitted FOR CHILDREN 2 YEARS OF AGE AND OLDER without the approval of a child's parents, who must be advised of the center's policy regarding television and video viewing.
- B. Special Activities Staff
 - 1. THE CENTER SHALL BE IN COMPLIANCE WITH SPECIAL ACTIVITIES RULES 7.719 INCLUDING BUT NOT LIMITED TO:
 - A. WATER ACTIVITIES INCLUDING SWIMMING, BOATING, CANOEING, SAILING, KAYAKING, AND TUBING.
 - B. ARCHERY AND RIFLE

- C. HORSEBACK RIDING
- D. TRAMPOLINE
- E. CLIMBING ACTIVITIES
- F. HIKING, BACKPACKING AND CAMPING
- G. BIKING
- 2. Assure that aAll staff members COUNTED IN RATIO SHALL supervising the activity are actively participatEing in the supervision of children.
- 3. 4. If the center engages in special activities away from the child care facility, the staff member responsible for the activity must SHALL possess HAVE evidence of appropriate experience, training, and/or certification in the program specialty. Verification of experience and/or certification must SHALL be in the staff member's personnel file at the center. This staff member must SHALL be present whenever the activity is being carried out unless otherwise indicated in these regulations.
- 4. 2. The qualified supervising staff member of special activities SHALL HAVE has the following duties:
 - a. Direct training of other staff members working in the activity.
 - b. Assign duties to staff members.
 - c. Assure that all staff members supervising the activity are actively participating in the supervision of children.
 - d. Assure that all necessary equipment is complete, in good repair, and safe to use.
 - e. Assure that environmental hazards are not severe enough to cause danger to participating children.

C. Field Trips

- The center must SHALL notify the children's parents or guardians in advance of any field trip. The staff-child ratio found at Section 7.702.55 must SHALL be maintained at all times. UNLESS THE RATIO IS DIFFERENT FOR THE SPECIFIED ACTIVITY, IN WHICH CASE THE ACTIVITY STAFF TO CHILD RATIO SHOULD APPLY. THE STAFF QUALIFICATIONS SHALL ALSO BE MAINTAINED.
- IF UNSCHEDULED WALKING FIELD TRIPS ARE TAKEN WRITTEN PERMISSION SHALL BE ON FILE. THE DESTINATION, ROUTE, AND TIMING OF WALKING TRIPS SHALL BE POSTED FOR PARENTS.
- 4. CHILDREN SHALL BE PRESCHOOL AGE OR OLDER AND ENROLLED IN THE PRESCHOOL CLASSROOM TO PARTICIPATE IN FIELD TRIPS OTHER THAN WALKING EXCURSIONS.
- 5. 2. Children must SHALL be actively supervised at all times.

- An accurate itinerary must SHALL remain at the center AND SHALL BE READILY ACCESSIBLE.
- 7. 4. The staff must SHALL have with them on a field trip the following information about each child: name, address, EMERGENCY CONTACT INFORMATION AND PHONE NUMBERS, and phone number of the child's physician HEALTH CARE PROVIDER or other appropriate health care professional, and the written authorization from the parent or guardian for emergency medical care, AND ANY OTHER PERTINENT MEDICAL INFORMATION AND RESCUE MEDICATIONS.
- 8. 5. A list of all children and staff on a field trip must-SHALL be kept at the center.
- FIELD TRIPS SHALL BE CANCELED IF THE CENTER CANNOT MAINTAIN STAFF TO CHILD RATIOS OR IF THE CENTER DOES NOT HAVE QUALIFIED STAFF TO PARTICIPATE IN THE FIELD TRIP.
- 10. STAFF HAVING REQUIRED MEDICATION ADMINISTRATION AND DELEGATION SHALL ACCOMPANY ANY FIELD TRIP THAT A CHILD REQUIRING MEDICATION PARTICIPATES IN.

-Swimming If the center uses a public pool for which the center is not responsible, the center need not provide a lifeguard if a qualified lifeguard is provided by the pool. Staff-child ratios must be maintained, and the lifeguard must not be counted in the staff to child ratio. If the public or private pool does not provide a qualified lifeguard, staff members meeting qualifications as stated at Section 7.702.68, D. 3, a. must be provided by the center. There must be at least 1 staff member at the pool for each 10 or fewer children. Swimming area rules and emergency procedures must be posted at the swimming area and explained to the children. Swimming is prohibited when fewer than the required qualified staff members are present. If the center uses a swimming area at a lake or pond, swimming area rules and emergency procedures must be posted at the swimming area and explained to the children. A swimming supervisor must be present who, as a minimum, holds a current American Red Cross lifeguard training certificate or equivalent certification from a group such as the YMCA or Boy Scouts. An additional staff member who holds at least an American Red Cross lifeguard training certificate or equivalent must be present at the swimming area for each 30 additional children in the water. At least 1 staff member must be at the swimming area for each 10 or fewer children present.

	d. Swimming is prohibited when fewer than the required qualified staff members are present.
	e. Swimming areas must be clearly designated.
4.	The swimming pool or swimming area must meet the standards of the Colorado Department of Public Health and Environment or its local unit.
	Before children are permitted to swim in water deeper than shoulder height, their swimming skills must be tested by staff members who hold an American Red Cross lifeguard training certificate or equivalent.
6.	Child care staff must directly supervise and monitor all children while at the swimming area. Supervision must include monitoring children for exhaustion, distress, sunburn, heatstroke, and threat of drowning.
7.	The following equipment must be available for use at the pool side or the lake shore where swimming is permitted:
	a. A buoy or a lemon line; and
	b. Reach pole; and
	c. Backboard.
8.	If swimming is permitted in a lake or a pond, a rescue boat equipped with a reach pole and a lemon line or a buoy must be available at all times.
9.	If a center has shoreline activities such as wading, fishing, ecology, or nature studies, the center must have a written policy that defines qualifications of persons accompanying the group and safety guidelines to be followed. Staff members must be acquainted with the policy.
10.	If the center has a permanent wading pool, children in care can use it only in the presence of an adult who holds a current American Red Cross basic lifeguarding certificate or equivalent and is responsible for providing lifesaving protection for the children. The required staff-child ratio must be maintained at all times.
E. Tramp	polines
1.	The trampoline supervisor must have formal training and experience in use of the trampoline and knowledge of safety and spotting techniques.
2.	Trampolines must be equipped with pads along the sides and kept in good repair.
3.	Use of the trampoline is prohibited when there is no trampoline supervisor present.
4.	Trampolines must be secured from unauthorized use.
	Only 1 child is allowed on a trampoline at any one time, regardless of the size of the trampoline.

- 6. Staff spotters must be posted on 4 sides of each trampoline at all times.

 Spotters must not stand, sit, or lie on the trampoline, but must stand in a position of readiness, watching the jumper at all times.
 - Children must dismount the trampoline by sitting on the edge and sliding off. They must not be allowed to jump off the trampoline.

7.702.69 Transportation

Rev. eff. 11/1/98

- A. Transportation Provided by the Center
 - 1. The center is responsible for any children it transports.
 - The center must SHALL obtain written permission from parents or guardians for any transportation of their child during child care OPERATING hours.
 - 3. PARENTS OR GUARDIANS SHALL GIVE WRITTEN PERMISSION, IN ADVANCE, FOR A VOLUNTEER/PARENT TO DRIVE THEIR CHILD ON A FIELD TRIP. THE PARENT OR GUARDIAN SHALL KNOW THE IDENTITY OF THE VOLUNTEER/PARENT THAT IS TRANSPORTING THEIR CHILD.
 - 4. ALL VOLUNTEER DRIVERS SHALL COMPLY WITH ALL OTHER REQUIREMENTS UNDER THIS RULE.
 - THE CENTER SHALL MAINTAIN A COPY OF THE VOLUNTEER/PARENT DRIVER'S CURRENT DRIVER'S LICENSE, INSURANCE AND REGISTRATION.
 - 4. WRITTEN TRANSPORTATION PLANS SHALL INCLUDE ITINERARY, AND A ROSTER TO VERIFY ATTENDANCE WHEN LOADING AND UNLOADING CHILDREN.
 - 35. The number of staff members who accompany children when being transported in the vehicle must SHALL meet the child care staff ratio found at Section 7.702.55. The driver of the vehicle is considered a staff member.
 - 6. THE CENTER SHALL TRACK IN WRITING WHEN CHILDREN ARE TRANSPORTED TO AND FROM THE FACILITY BY THE CENTER. ATTENDANCE SHALL BE VERIFIED EACH TIME CHILDREN BOARD OR EXIT THE VEHICLE.
 - Children must SHALL be loaded and unloaded out of the path of moving vehicles.
 - 4. Children must not be permitted to ride in the front seat of a vehicle unless they are 4 years old or over, more than 40 pounds, and are secured in a child restraint system that conforms to all applicable Federal Motor Vehicle Safety Sstandards. Children must remain seated while the vehicle is in motion.
 - 8. CHILDREN SHALL NOT OCCUPY THE FRONT SEAT OF A VEHICLE EQUIPPED WITH AN OPERATIONAL PASSENGER-SIDE AIRBAG.

- ANY CHILD TRANSPORTED SHALL BE PROPERLY RESTRAINED IN A CHILD RESTRAINT SYSTEM THAT MEETS THE REQUIREMENTS OF THE COLORADO CHILD PASSENGER SAFETY LAW.
- 10. THE PROVIDER SHALL NOT TRANSPORT MORE CHILDREN THAN ANY VEHICLE IS ABLE TO SAFELY ACCOMODATE WHEN CHILD RESTRAINT SYSTEMS AND SEAT BELTS ARE PROPERLY INSTALLED IN THE VEHICLE.
- 11. MODIFICATIONS TO VEHICLES INCLUDING, BUT NOT LIMITED TO, THE ADDITION OF SEATS AND SEAT BELTS SHALL BE COMPLETED BY THE MANUFACTURER OR AN AUTHORIZED REPRESENTATIVE OF THE MANUFACTURER. DOCUMENTATION OF SUCH MODIFICATIONS SHALL BE AVAILABLE FOR REVIEW.
- 612. Children must SHALL not be permitted to stand or sit on the floor of a moving vehicle, and their arms, HANDS, legs, and heads must MUST remain inside the vehicle at all times.
- 713. Children must SHALL not be left unattended in the vehicle.
- 8. Transportation arrangements for school-age children must be by agreement between the center and the children's parents, i.e., whether the child can walk, ride a bicycle, or travel in a car. The center must monitor the children to be sure they arrive at the center when expected and follow up on their whereabouts if they are late. Written permission from parents or guardians for their children to attend community functions after school hours must include agreements regarding transportation.
- Prior to a field trip or other excursion, the center must obtain information on liability insurance from parents and staff who transport children in their own cars and verify that all drivers have valid driver's licenses.
- 14.12. Transportation arrangements for school-age children must SHALL be by agreement between the center and the children's parents, i.e., whether the child ean walkS, rideS a bicycle, or travelS in a car.
- 15.13. The center must monitor the children to be sure they arrive at the center when expected and follow up on their whereabouts if they are late.
- 16.14. Written permission from parents or guardians for their children to attend community functions after school hours must SHALL include agreements regarding transportation.
- 17. PERMISSIONS SLIPS SHALL INCLUDE A CONFIDENTIALITY STATEMENT FOR PARENTS OR GUARDIANS TO ALLOW VOLUNTEERS TO KNOW PERSONAL INFORMATION ABOUT THEIR CHILDREN AND EMERGENCY CONTACT INFORMATION, AS WELL AS, TO INFORM THE VOLUNTEER THAT THEY SHALL NOT DISCLOSE THIS INFORMATION
- B. Requirements for Vehicles
 - 1. Any vehicle used for the transportation of children to and from the center or during center activities must SHALL meet the following requirements:
 - a. The vehicle must-SHALL be enclosed and have door locks.

- b. The seats of the vehicle must SHALL be constructed and installed according to the vehicle manufacturer's specifications.
- c. Seating must SHALL be comfortable IN GOOD CONDITION, with a seat of at least 10 inches wide OR AS NEEDED FOR THE SIZE for each child, NOT TO EXCEED MANUFACTURER'S ESTABLISHED PASSENGER CAPACITY.
- In passenger vehicles, which include automobiles, station wagons, and vans with a manufacturer's established capacity of SIXTEEN (16) or fewer passengers, INCLUDING THE DRIVER, and less than TEN-THOUSAND (10,000) pounds, the following is required:
 - Each child must SHALL be restrained SECURED in an individual seat belt RESTRAINT.
 - b. Two or more children must SHALL never be restrained in ONE (1) seat belt.
 - c. Lap belts must SHALL be secured low and tight across the upper thighs and under the belly.
 - d. Children must SHALL be instructed and encouraged to keep the seat belt properly fastened and adjusted. STAFF OR VOLUNTEER SHALL CHECK AND MONITOR SEAT BELT USE.
- 3. In vehicles with a manufacturer's established capacity of SIXTEEN (16) or more passengers, seat belts for passengers are not required.
- C. Requirements for Drivers of Vehicles
 - THE DRIVER OF A VEHICLE USED TO TRANSPORT CHILDREN 1. FOLLOW REQUIRED STATE **INCLUDING** SHALL LAWS, POSSESSION OF A CURRENT VALID COLORADO DRIVERS LICENSE. AUTOMOBILE INSURANCE, AND MEET THE REQUIREMENTS OF COLORADO CHILD PASSENGER SAFETY LAWS.
 - 1. All drivers of vehicles transporting children must comply with applicable laws of the Colorado Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the center operates.
 - 4.2. All drivers of vehicles owned or leased by the center in which children are transported must SHALL have a current department-approved first aid and safety certificate that includes CPR for all ages of children.
 - 5.3. In each vehicle used to transport children, drivers must SHALL have access to a STOCKED first (1ST) aid kit.
 - 6.4. The driver must SHALL ensure that all doors are secured at all times when the vehicle is moving.
 - 7.5. The driver must make a good faith effort to ensure that each child is properly belted throughout the trip. IT IS THE RESPONSIBILITY OF THE DRIVER TRANSPORTING CHILDREN TO ENSURE THAT

CHILDREN ARE PROVIDED WITH AND PROPERLY USE A CHILD RESTRAINT SYSTEM OR SAFETY BELT SYSTEM.

Transporting Infants and Toddlers Children must be properly fastened into a child restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards pursuant to Colorado law. There must be at least 1 adult, in addition to the driver, for each 5 or fewer infants/toddlers being transported. Each adult must have a current department-approved first aid and safety certificate that includes CPR for all ages of children. An adult must accompany each child to and from the vehicle. Infants and toddlers must not be transported in the front seat of a vehicle. CHILD CARE EQUIPMENT AND MATERIALS 7.702.7 7.702.71 **General Requirements** Rev. eff. Α. Indoor and outdoor play equipment and materials must SHALL be appropriate for 10/1/03 children's ages, size, and activities. B. SEATS FOR INFANT FEEDING ARE COMFORTABLE AND SUPPORTIVE TO INCLUDE BUT NOT LIMITED TO BACK SUPPORTS, FOOT RESTS AND SAFETY BELTS. 1. ELEVATED FEEDING TABLES WITH INSET BUCKET SEATS DESIGNED FOR MULTIPLE INFANTS AND/OR TODDLERS ARE PROHIBITED. C. THERE SHALL BE ENOUGH SEATS FOR FEEDING FOR THE NUMBER OF TODDLERS AND OLDER CHILDREN IN ATTENDANCE. SEATS SHALL BE COMFORTABLE AND SUPPORTIVE AND INCLUDE BACK SUPPORTS, FOOT RESTS, AND CHILDRENS FEET SHOULD TOUCH THE FLOOR. (School based programs cannot meet this - back support for eating/seating---SUGGESTIONS?) BD. Indoor and outdoor materials and equipment must SHALL be sufficiently varied and appropriate for the developmental needs of the children and the number attending.

7.702.71 General Requirements (continued)

CE.

D. Durable furniture such as tables and chairs must SHALL be child-sized. er appropriately adapted for children's use.

Indoor and outdoor equipment, materials, and furnishings must SHALL be MADE FOR COMMERCIAL USE, sturdy, safe, and free of hazards. AND SHALL MEET

E. Children must SHALL wear helmets when riding scooters, bicycling, skateboarding, or rollerblading. HELMETS ARE NOT REQUIRED FOR TRICYCLE USE.

NATIONALLY RECOGNIZED SAFETY STANDARDS.

- H.F. In infant nurseries, an adequate number of high chairs or other suitable pieces of equipment that meet federal Consumer Product Safety Commission standards must be provided for infant feeding.
- I.G. The infant nursery must SHALL have an adult rocking chair.
- H. Each infant nursery must have a piece of sturdy equipment that is easily mobile, and will hold a minimum of 5 infants for use in emergency exiting.
- J. FOR EVERY FIVE (5) INFANTS, THE CENTER SHALL HAVE AT LEAST ONE (1) PIECE OF STURDY EQUIPMENT THAT IS EASILY MOBILE AND ACCESSIBLE TO EFFECTIVELY EVACUATE ALL INFANTS FOR WHICH THE CLASSROOM IS LICENSED.
- K. EVACUATION EQUIPMENT SHALL BE LOCATED IN THE ROOM OR IMMEDIATELY OUTSIDE THE DOOR, SHALL BE LABLED FOR EASY IDENTIFICATION AND READY FOR USE. EQUIPMENT SHALL NOT BLOCK ANY EXIT ROUTES.
- L. IF A CRIB IS NOT DESIGNED FOR EMERGENCY EVACUATION, THE CRIB SHALL BE REINFORCED AND FIT THROUGH DOORWAYS.
- M. A THERMOMETER SHALL BE IN EACH INFANT AND TODDLER CLASSROOM THAT MEASURES THE TEMPERATURE AT FLOOR LEVEL TO ENSURE A MINIMUM OF SIXTY EIGHT (68) DEGREES IS MAINTAINED.

7.702.72 Play-Equipment and Materials

2/1/05

Rev. eff.

- A. Equipment and materials must SHALL be provided for both indoor and outdoor play.
- B. ANY PERMANENTLY INSTALLED CLIMBING EQUIPMENT OR PORTABLE CLIMBING EQUIPMENT EIGHTEEN (18) INCHES OR HIGHER, INDOOR OR OUTDOOR SHALL BE ON PROTECTIVE SURFACING MANUFACTURED FOR SUCH USE AND MEET NATIONALLY RECOGNIZED SAFETY STANDARDS.

 1. PERMANENTLY INSTALLED CLIMBING EQUIPMENT SHALL BE MANUFACTURED FOR COMMERCIAL USE.
- D. PERMANENTLY INSTALLED CLIMBING EQUIPMENT SHALL HAVE AT LEAST ONE (1) ACCESS POINT THAT IS EITHER STEPS OR A RAMP.
- E. EXISTING HOME MADE PERMANENTLY INSTALLED CLIMBING EQUIPMENT SHALL BE INSPECTED AND APPROVED BY A CERTIFIED PLAYGROUND INSPECTOR EVERY TWO (2) YEARS.
- F. EXISTING CLIMBING EQUIPMENT THAT IS NOT MANUFACTURED FOR COMMERCIAL USE SHALL BE REMOVED BY xxx.

H.

- **CG**. Outdoor play equipment must SHALL meet the following requirements:
 - Swings must SHALL have seats made of a flexible material.

- PROTRUDING BOLTS SHALL NOT HAVE MORE THAN TWO (2) THREADS SHOWING OR SHALL BE CAPPED.
- 3. BALANCE BEAMS OF ANY HEIGHT ARE NOT ALLOWED FOR USE BY CHILDREN UNDER THE AGE OF TWO (2) YEARS OLD.
- 4. CLIMBING ROPES SHALL ONLY BE USED BY CHILDREN AGE 4 AND OLDER, AND SHALL BE SECURED AT BOTH ENDS AND NOT EXCEED A HEIGHT OF SIXTY (60) INCHES.
- 5. TRACK RIDES, ZIP LINES, MONKEY BARS, OVERHEAD RINGS, AND VERTICAL SLIDING POLES SHALL ONLY BE USED BY CHILDREN AGE FOUR (4) YEARS AND OLDER.
- FULL ARCH (RAINBOW) CLIMBERS, FULCRUM SEA SAWS, SPIRAL SLIDES WITH A FULL THREE-HUNDRED-SIXTY (360) DEGREE TURN OR MORE, LOG ROLLS, MERRY GO ROUNDS AND ANY MOTORIZED RIDING TOYS ARE PROHIBITED.
- Moving equipment must SHALL be located toward the edge or corner of a play area or be designed in such a way as to discourage children from running into the path of the moving equipment and ARRANGED TO MINIMIZE DANGER TO CHILDREN.
- 3. Metal and PLASTIC equipment must—SHALL be placed in the shade when possible and SHALL NOT BE USED BY CHILDREN WHEN IT BECOMES HOT. METAL AND PLASTIC EQUIPMENT SHALL BE MONITORED FOR SAFE USE PRIOR TO USE BY CHILDREN.
- 4. The maximum height of any piece of playground EXISTING OUTSIDE CLASSROOM equipment is SIX (6) feet if accessible to children TWO AND ONE-HALF (2½) to SIX (6) years of age, and THREE (3) feet if accessible to children under TWO AND ONE-HALF (2½) years of age.
- XX NEWLY INSTALLED EQUIPMENT (INSERT DATE RULES BECOME EFFECTIVE) ACCESSIBLE TO CHILDREN UNDER TWO AND ONE-HALF (2½) YEARS OF AGE SHALL NOT EXCEED THIRTY TWO (32) INCHES.
- All pieces of playground OUTDOOR equipment must SHALL be designed AND MAINTAINED to guard against entrapment and strangulation.
- 6. ANY NEWLY INSTALLED OUTDOOR EQUIPMENT SHALL BE MADE OF SAFE, NON-METAL MATERIAL OR PLACED IN THE SHADE.
- 7.6. All pieces of permanently installed playground OUTSIDE CLASSROOM equipment LESS THAN THREE (3) FEET IN HEIGHT must SHALL HAVE BENEATH AND be surrounded by a resilient PROTECTIVE surfacing of a depth of at least NINE (4) (9) inches. By January 1, 2003 ADD NEW DATE, for equipment over THREE (3) feet IN HEIGHT, SHALL HAVE resilient material PROTECTIVE SURFACING must be/HAVE BENEATH AND BE SURROUNDED BY WITH a depth of at least 6 NINE (9) inches. DOCUMENTATION OF ASTM 1292 COMPLIANCE SHALL BE AVAILABLE.
- Xx Rubber mats, IMPACT MATS AND POURED IN PLACE SURFACING manufactured for such use, consistent INSTALLED ACCORDING TO

MANUFACTURER AND in ACCORDANCE with the guidelines of the Consumer Product Safety Commission NATIONALLY RECOGNIZED SAFETY STANDARDS may be used in place of resilient material for both equipment heights. DOCUMENTATION OF ASTM 1292 COMPLIANCE SHALL BE AVAILABLE.

- 8. ALL CLIMBING EQUIPMENT FOR CHILDREN TWO AND ONE HALF AND UNDER SHALL HAVE A MINIMUM USE ZONE SURROUNDING IT OF AT LEAST THREE (3) FEET IN ALL DIRECTIONS AND ALL CLIMBING EQUIPMENT FOR CHILDREN TWO AND ONE HALF AND OLDER SHALL HAVE A MINIMUM USE ZONE SURROUNDING IT OF AT LEAST SIX (6) FEET IN ALL DIRECTIONS. THE USE ZONE PROTECTIVE SURFACE SHALL BE MAINTAINED IN ACCORDANCE WITH NATIONALLY RECOGNIZED SAFETY STANDARDS.
- 10.7. FINE LOOSE Sand used as a resilient surface must SHALL be raked regularly to retain its resiliency and to retain a depth of 6 NINE (9) inches.
- 11. SAND BOXES SHALL BE COVERED WHEN NOT IN USE AND KEPT FREE OF ANIMAL CONTAMINATION.
- 11.8. The use of any materials under permanently installed playground OUTSIDE CLASSROOM equipment other than wood chips, wood mulch, engineered wood fiber, pea gravel, synthetic pea gravel, shredded rubber tires, and fine loose sand must SHALL be approved by the Department.
- 12. WHEN THE PLAY AREA IS NOT IMMEDIATELY ADJACENT TO THE INDOOR FACILITY, STAFF SHALL ACCOMPANY CHILDREN TO AND FROM THE PLAY AREA AND HAVE APPROVAL FROM LICENSING FOR SUCH ACCOMODATIONS.
- 13. ALL SWING SETS SHALL HAVE A MINIMUM OF NINE (9) INCHES PROTECTIVE SURFACING AROUND THE SWING USE ZONE.
- 14. NO MORE THAN TWO (2) SWINGS PER BAY ARE ALLOWED AND SHALL BE AT LEAST TWENTY-FOUR (24) INCHES APART.
- 15. THE SUPPORT STRUCTURE CLEARANCE SHALL BE AT LEAST THIRTY (30) INCHES FOR PRESCHOOL AND SCHOOL AGE SWINGS AND AT LEAST TWENTY (20) INCHES FOR INFANT AND TODDLER SWINGS.
- 16. USE ZONE FOR SWINGS SHALL EXTEND AROUND THE SWINGS AT DOUBLE THE DISTANCE OF THE PIVOT POINT TO THE GROUND. THIS INCLUDES THE FRONT AND BACK OF THE SWINGS AS WELL AS SIX (6) FEET ON EACH SIDE.
- 17. SWINGS FOR INFANT AND TODDLER USE SHALL HAVE A MINIMUM USE ZONE OF THREE (3) FEET ON THE SIDES OF THE STRUCTURE AND TWO (2) TIMES THE DISTANCE FROM THE PIVOT POINT TO THE SEAT OF THE BUCKET SEAT IN FRONT AND BACK OF THE SWINGS.

- 18. INFANT AND TODDLER SWINGS DESIGNED FOR INDEPENDENT USE SHALL HAVE A SIX-EIGHT (6-8) INCH CLEARANCE FROM GROUND TO SEAT.
- 19. INFANT AND TODDLER BUCKET SEATS FOR USE WITH ADULT ASSISTANCE SHALL HAVE AT LEAST TWENTY-FOUR (24) INCHES OF CLEARANCE FROM GROUND TO SEAT. PIVIOT POINTS SHALL BE BETWEEN FOURTY-SEVEN (47) INCHES AND NINETY-FIVE (95) INCHES ABOVE THE PROTECTIVE SURFACING.
- 20. INFANT AND TODDLER SWINGS SHALL HAVE AT LEAST TWENTY (20) INCHES BETWEEN A SWING AND THE SUPPORT STRUCTURE AND TWENTY (20) INCHES BETWEEN THE CHAINS.
- 20. PRESCHOOL AND SCHOOL AGE SWINGS SHALL HAVE AT LEAST TWELVE (12) INCHES OF CLEARANCE FROM GROUND TO SEAT.
- 21. PRESCHOOL AND SCHOOL AGE SINGLE ACCESS SWINGS SHALL HAVE A TOP PIVOT POINT OF NO MORE THAN NINETY-SIX (96) INCHES.
- 22. TIRE SWINGS SHALL BE USED IN ACCORDANCE WITH MANUFACTURERS AGE, USE AND INSTALLATION INSTRUCTIONS.
- 23. TIRE SWINGS SHALL HAVE A THREE-HUNDRED-SIXTY (360) DEGREE USE ZONE THAT IS AT LEAST AS LARGE AS THE DISTANCE FROM THE PIVOT POINT TO THE SEAT PLUS SIX (6) FEET.
- TIRE SWINGS SHALL HAVE AT LEAST TWELVE (12) INCHES OF GROUND CLEARANCE.
- 25. STRUCTURE CLEARANCE FOR PRESCHOOL AND SCHOOLAGE TIRE SWINGS SHALL BE AT LEAST THE DISTANCE FROM THE PIVOT POINT TO THE SEAT PLUS THIRTY (30) INCHES.
- 26. STRUCTURE CLEARANCE FOR INFANT AND TODDLER TWO-FRO TIRE SWINGS SHALL BE AT LEAST THE DISTANCE FROM THE PIVOT POINT TO THE SEAT PLUS TWENTY (20) INCHES. ROTATING TIRE SWINGS FOR INFANT AND TODDLERS IS PROHIBITED.
- 27. PRESCHOOL AND SCHOOL AGE SLIDES UP TO SIX (6) FEET HIGH SHALL HAVE AT LEAST A SIX (6) FEET USE ZONE AROUND IT WITH A MINIMUM OF NINE (9) INCHES OF RESILIENT SURFACE.
- 28. INFANT AND TODDLER SLIDES SHALL HAVE A USE ZONE OF AT LEAST SIX (6) FEET AT THE END OF THE SLIDE AND AT LEAST THREE (3) FEET IN ALL OTHER DIRECTIONS WITH AT LEAST NINE (9) INCHES OF RESILIENT SURFACE.
- SLIDES FOUR (4) FEET HIGH OR HIGHER SHALL HAVE AN EXIT HEIGHT OF SEVEN TO FIFTEEN (7-15) INCHES.
- 30. SLIDES LESS THAN FOUR (4) FEET HIGH SHALL HAVE AN EXIT HEIGHT OF ELEVEN (11) INCHES OR LESS.

- 31. SLIDES SHALL NOT HAVE ANY GAP BETWEEN THE PLATFORM AND THE SLIDE.
- C.G. The center must SHALL have enough play materials and equipment so that at any one time each child for which WHOM the center is licensed can be individually involved. Separate play rooms or separate interest centers must SHALL be provided for each category of equipment required for the program. A variety of material and equipment SHALL BE AVAILABLE FOR ACTIVE AND QUIET PLAY, AS WELL AS FOR INDOOR AND OUTDOOR PLAY, from the following categories: must be available.
 - 1. Art Supplies

INFANT AND TODDLER ART SUPPLIES

- A. EACH TODDLER CLASSROOM LICENSED FOR CHILDREN EIGHTEEN (18) MONTHS AND OLDER SHALL HAVE A MINIMUM OF FIVE (5) TYPES OF ART MATERIALS FROM THE FOLLOWING: DRAWING MATERIALS SUCH AS PAPER, CRAYONS, NONTOXIC FELT PENS, THICK PENCILS, NONTOXIC PAINTS; THREE DEMENSIONAL MATERIALS SUCH AS PLAY DOUGH, CLAY
- 1. EACH TYPE OF ART MATERIAL SHALL HAVE A MINIMUM OF FIVE (5) PIECES (5 PAINTS, 5 PAINT BRUSHES ETC)
- B. FOOD ITEMS, GLITTER, SHAVING CREAM, COTTON BALLS, GOOGLY EYES AND ANY TOXIC OR POTENTIAL CHOKE HAZARD SHALL NOT BE USED.

PRESCHOOL AND SCHOOL AGE ART SUPPLIES

- A. EACH PRESCHOOL OR SCHOOL AGE CLASSROOM SHALL HAVE A MINIMUM OF TEN (10) TYPES OF ART MATERIALS FROM THE FOLLOWING: DRAWING MATERIALS SUCH AS PAPER, CRAYONS, NONTOXIC FELT PENS, THICK PENCILS, NONTOXIC PAINTS; THREE DEMENSIONAL MATERIALS SUCH AS PLAY DOUGH, CLAY, WOOD GLUING, OR CARPENTRY; COLLAGE MATERIALS/TOOLS SUCH AS CHILD SAFE SCISSORS, HOLE PUNCHES, TAPE DISPENSERS.
- B. EACH TYPE OF ART MATERIAL SHALL HAVE A MINIMUM OF TEN (10) PIECES (10 PAINTS, 10 PAINT BRUSHES, 10 CRAYONS ETC)
- C. FOOD ITEMS, GLITTER, SHAVING CREAM, COTTON BALLS, GOOGLY EYES AND ANY TOXIC OR POTENTIAL CHOKE HAZARD SHALL NEVER BE USED WHEN CHILDREN UNDER THREE (3) ARE PRESENT.
 - 1. TOXIC ITEMS SHALL NEVER BE USED.

2. Blocks and Accessories

- A. BLOCKS SHALL BE AT LEAST TWO (2) INCHES BY TWO (2) INCHES AND SHALL NOT BE INTERLOCKING.
- B. SPACE WITH A FLAT BUILDING SURFACE SHALL BE AVAILABLE FOR BUILDING IN AN AREA NOT IN THE MAIN TRAFFIC AREA.

C. BLOCKS SHALL BE ACCESSIBLE TO CHILDREN MUCH OF THE DAY.

INFANT AND TODDLER BLOCKS AND ACCESSORIES

A. EACH INFANT AND TODDLER CLASSROOM SHALL HAVE AT LEAST ONE (1) SET OF 6 OR MORE SOFT VINYL OR PLASTIC BLOCKS.

SCHOOL AGE BLOCKS AND ACCESSORIES

A. EACH CLASSROOM SHALL HAVE AT LEAST TWO (2) SETS OF BLOCKS WITH A MINIMUM OF TEN (10) BLOCKS PER SET.

B. EACH CLASSROOM SHALL HAVE A VARIETY OF AT LEAST FIVE (5) ACCESSORIES FOR EACH BLOCK SET. THE ACCESSORIES SHALL BE STORED WITH THE BLOCK SETS AND SHALL BE REPRESENTATIVE OF PEOPLE, ANIMALS, TRANSPORTATION ETC.

Books and Posters AND VISUAL DISPLAYS

BOOKS

A. EACH CLASSROOM SHALL HAVE A MINIMUM OF TWELVE (12) BOOKS AND ONE (1) ADDITIONAL BOOK FOR EACH CHILD IN THE ROOM.

B. BOOKS SHALL BE IN GOOD REPAIR.

C. BOOKS SHALL BE AGE AND DEVELOPMENTALLY APPROPRIATE

FOR THE AGES OF CHILDREN IN THE CLASSROOM.

D. BOOKS SHALL BE ACCESSIBLE TO CHILDREN MUCH OF THE

DAY.

E. BOOKS SHALL REPRESENT DIVERSITY IN A POSITIVE WAY.

VISUAL DISPLAYS

A. EACH CLASSROOM SHALL HAVE AT LEAST TEN (10) VISUAL DISPLAYS AROUND THE CLASSROOM. THE DISPLAYS SHALL NOT ALL BE IN ONE PLACE.

B. AT LEAST TWO (2) OF THE TEN (10) VISUAL DISPLAYS SHALL

REPRESENT NATURE REALISTICALLY.

C. AT LEAST TWO (2) OF THE TEN (10) VISUAL DISPLAYS SHALL REPRESENT DIVERSITY IN A POSITIVE WAY.

4. Dramatic Play Area

A. DRAMATIC PLAY EQUIPMENT SHALL BE ACCESSIBLE TO CHILDREN MUCH OF THE DAY.

B. DOLLS SHALL REPRESENT THREE (3) RACES.

INFANT DRAMATIC PLAY

A. EACH INFANT CLASSROOM SHALL HAVE AT LEAST FIVE (5) TOYS FROM THE FOLLOWING CATAGORIES: DOLLS, SOFT ANIMALS, POTS AND PANS, TOY PHONES

TODDLER DRAMATIC PLAY

A. EACH TODDLER CLASSROOM SHALL HAVE AT LEAST TWO (2) OR MORE FROM EACH OF THE FOLLOWING CATAGORIES: DRESS UP, CHILD SIZE FURNITURE, COOKING, EATING, DOLLS, ANIMALS.

PRESCHOOL, SCHOOL AGE DRAMATIC PLAY

A. EACH PRESCHOOL AND/OR SCHOOL AGE CLASSROOM SHALL HAVE

AT LEAST FIVE (5) OR MORE FROM EACH OF THE FOLLOWING CATAGORIES: DRESS UP, CHILD SIZE FURNITURE, COOKING, EATING, DOLLS, ANIMALS.

5. Large Muscle GROSS MOTOR Equipment

A. GROSS MOTOR EQUIPMENT SHALL BE AVAILABLE TO CHILDREN FOR INDOOR GROSS MOTOR ACTIVITES WHEN WEATHER PREVENTS OUTDOOR PLAY.

INFANT AND TODDLER GROSS MOTOR EQUIPMENT

- A. EACH INFANT CLASSROOM SHALL HAVE AT LEAST THREE (3) PIECES OF GROSS MOTOR EQUIPMENT THAT IS USED INDOORS AND INFANTS LEARNING TO WALK USE TO PULL THEMSELVES UP ON, PUSH OR PULL, SIT AND RIDE.
- B. EACH TODDLER CLASSTOOM SHALL HAVE AT LEAST FIVE (5) PIECES OF GROSS MOTOR EQUIPMENT THAT IS USED INDOORS AND WILL PROMOTE THROWING/CATCHING, JUMPING, HOPPING, SWINGING, PUSHING/PULLING, And KICKING. SUCH EQUIPMENT MAY INCLUDE HOOLA HOOPS, BALLS, WHEEL TOYS, ETC.

PRESCHOOL AND SCHOOL AGE GROSS MOTOR EQUIPMENT

A. EACH PRESCHOOL AND SCHOOL AGE CLASSROOM SHALL HAVE AT LEAST TEN (10) PIECES OF GROSS MOTOR EQUIPMENT THAT IS USED INDOORS AND WILL PROMOTE THROWING/CATCHING, JUMPING, HOPPING, SWINGING, PUSHING/PULLING, And KICKING. SUCH EQUIPMENT MAY INCLUDE HOOLA HOOPS, BALLS, WHEEL TOYS, BATS, RACKETS, ETC.

6. Manipulative Toys FINE MOTOR EQUIPMENT

A. FINE MOTOR EQUIPMENT SHALL BE ACCESSIBLE TO CHILDREN MOST OF THE DAY.

INFANT AND TODDLER FINE MOTOR EQUIPMENT

A. EACH INFANT CLASSROOM SHALL HAVE AT LEAST FIVE (5) INTACT FINE MOTOR ACITIVITIES SUCH AS: GRASPING TOYS, BUSY BOX, NESTED CUPS, CONTAINERS FOR DUMPING AND FILLING, TEXTURE TOYS, CRADLE GAMES, ETC.

B. EACH TODDLER CLASSROOM SHALL HAVE LEAST TEN (10) INTACT FINE MOTOR ACTIVITIES SUCH AS: SHAPES, SORTING, STRINGING BEADS, PEGS AND PEG BOARDS, SIMPLE PUZZLES, POP BEADS, SMALL BLOCKS, ETC. THIS EQUIPMENT SHALL BE AGE APPROPRIATE AND SHALL NOT BE A CHOKE HAZARD.

PRESCHOOL AND SCHOOL AGE FINE MOTOR EQUIPMENT

A. EACH PRESCHOOL AND SCHOOL AGE CLASSROOM SHALL HAVE AT LEAST AT LEAST ONE OF EACH TYPE OF THE FOLLOWING FOUR (4) TYPES OF INTACT FINE MOTOR ACTIVITIES 1. SMALL BUILDING TOYS SUCH AS INTERLOCKING BLOCKS OR LINCOLN LOGS.

- 2. ART MATERIALS SUCH AS CRAYNS AND SCISSORS,
- 3. MANIPULATIVES SUCH AS STRINGING BEADS, PEGS AND PEG BOARDS AND SEWING CARDS.
- 4. PUZZLES

6.Musical Equipment AND MATERIALS

A. MUSIC EQUIPMENT AND MATERIALS SHALL BE ACCESSIBLE TO CHILDREN FOR AT LEAST ONE (1) HOUR PER DAY.

- B. PART DAY PROGRAMS SHALL HAVE MUSIC EQUIPMENT ACCESSIBLE TO CHILDREN FOR AT LEAST TWENTY (20) MINUTES PER DAY.
- B. ALL MUSIC THAT CHILDREN ARE EXPOSED TO SHALL BE FROM A VARIETY OF TYPES, SHALL BE AGE APPROPRIATE AND SHALL NOT CONTAIN EXPLICIT LANGUAGE OR TOPICS AND CAN BE FROM THE FOLLOWING TYPES OF MUSIC: CLASSICAL, POPULAR, CHILDREN'S SONGS, JAZZ, ROCK, REGGAE, RHYTHM AND BLUES, CULTURAL, DIVERSE LANGUAGES, LULLABIES, RAP, FOLK SONGS, COUNTY.

INFANT AND TODDLER MUSICAL EQUIPMENT AND MATERIALS

A. EACH INFANT CLASSROOM SHALL HAVE AT LEAST FIVE (5) MUSICAL TOYS.

B. EACH TODDLER CLASSROOM SHALL HAVE AT LEAST TEN (10) MUSICAL TOYS OR NO LESS THAN ONE (1) MUSICAL TOY PER CHILD FOR THE NUMBER OF CHILDREN ATTENDING. MUSICAL TOYS ARE: MUSICAL INSTRUMENTS, TAPE OR RECORD PLAYER, COMPUTER PROGRAM, OR DANCE PROPS SUCH AS DRESS UP CLOTHES, CULTURAL DANCE OUTFITS, ETC.

PRESCHOOL AND SCHOOL AGE MUSICAL EQUIPMENT AND MATERIALS.

- A. EACH PRESCHOOL AND SCHOOL AGE CLASSROOM SHALL HAVE AT LEAST TEN (10) MUSICAL TOYS OR NO LESS THAN ONE (1) MUSICAL TOY PER CHILD FOR THE NUMBER OF CHILDREN ATTENDING. MUSICAL TOYS ARE: MUSICAL INSTRUMENTS, TAPE OR RECORD PLAYER, COMPUTER PROGRAM, OR DANCE PROPS SUCH AS SCARVES, DRESS UP CLOTHES, CULTURAL DANCE OUTFITS, ETC.
- B. CHILDREN SHALL BE ABLE TO INDEPENDENTLY ACTIVATE, PLAY WITH OR ENGAGE IN A MUSIC ACTIVITY WITHOUT ADULT INTERVENTION.

11.NATURE AND Science Materials

A. CHILDREN SHALL HAVE AT LEAST TWO (2) OPPORTUNITIES EVERY DAY TO EXPERIENCE THE NATURAL WORLD.

INFANT AND TODDLER NATURE AND SCIENCE

A. OF THE PICTURES AND BOOKS IN THE CLASSROOM AT LEAST HALF SHALL REPRESENT NATURE REALISTICALLY.

PRESCHOOL, SCHOOL AGE NATURE AND SCIENCE

- A. OF THE PICTURES AND BOOKS IN THE CLASSROOM AT LEAST TEN (10) SHALL REPRESENT NATURE REALISTICALLY.
- B. THERE SHALL BE AT LEAST TWO (2) PIECES OF EQUIPMENT FROM THE FOLLOWING LIST: MICROSCOPES, MAGNIFYING GLASSES, PLANTS OR ANIMALS

9. SAND AND WATER PLAY

- A. NOT REQUIRED FOR CHILDREN UNDER EIGHTEEN (18) MONTHS OF AGE.
- B. THE FOLLWING MATERIAL SHALL NOT BE USED: DRIED BEANS, PEBBLES, STYROFOAM, CORNMEAL AND FLOWER.
- C. POTTING SOIL SHALL ONLY BE USED IF IT IS STERALIZED.
- D. SMALL NOODLES SHALL NOT BE USED IF CHILDREN UNDER THREE (3) ARE PRESENT.
- E. EACH SAND OR WATER TABLE/AREA SHALL HAVE AT LEAST TWO (2) TOYS FOR EACH CHILD PARTICIPATING TO USE. THE TOYS SHALL BE FROM THE FOLLOWING LIST: MEASURING CUPS, UNBREAKABLE CONTAINERS, FUNNELS, PLASTIC TUBES, MOLDS,

SHOVELS, SCOOPS, TROWELS, PAILS, RAKES, SIFTERS, SAND/WATER -WHEELS, PIPES, WIDE-TOOTHED COMBS, SPONGES, TURKEY BASTERS, SPRAY BOTTLES, PUMPS AND FANTASY TOYS SUCH AS ANIMALS, SEA CREATURE, DOLLS, AND BOATS

F. A STAFF MEMBER SHALL BE WITHIN ARMS LENGTH OF SAND AND WATER ACTIVITES TO PROVIDE CLOSE SUPERVISION.
G. CHILDREN SHALL NOT BE ALLOWED TO EAT, DRINK OR THROW MATERIALS FROM THE SAND AND WATER TABLES.
H. STAFF SHALL MONITOR THE SAND AND WATER AREAS FOR SLIPPERY FLOORS.

11. COZY AREA

- A. EACH CLASSROOM SHALL HAVE A COZY AREA THAT HAS SOFT FURNISHING AND TOYS ACCESSIBLE TO CHILDREN MOST OF THE DAY.
- B. COZY AREAS SHALL NOT BE USED FOR PHYSICALLY ACTIVE PLAY.

INFANT AND TODDLER COZY AREA

A. EACH INFANT OR TODDLER ROOM SHALL HAVE A MINIMUM OF THREE (3) SOFT TOYS SUCH AS STUFFED ANIMALS AND SOFT DOLLS AND TWO (2) SOFT FURNISHINGS SUCH AS UPHOLSTERED FURNITURE, CUSHIONS, OR RUGS/CARPETING.

PRESCHOOL AND SCHOOL AGE COZY AREA

A. EACH PRESCHOOL OR SCHOOL AGE CLASSROOM SHALL HAVE A MINIMUM OF FIVE (5) SOFT TOYS SUCH STUFFED ANIMALS AND SOFT DOLLS AND THREE (3) SOFT FURNISHINGS SUCH AS UPHOLSTERED FURNITURE, CUSHIONS, RUGS/CARPETING AND BEAN BAGS.

D. If the center serves school-age children, it must have some age-appropriate materials and equipment from each of the following categories:

1. Arts and Crafts

2. Games

3. Sports

4. Science

5. Library

- E. An appropriate supply of play materials must SHALL be readily accessible to children and must SHALL be arranged in an orderly manner so that children can ARE ABLE TO select, remove, and replace the play materials either independently or with minimum assistance.
- F. Toys, and toy parts, FURNISHINGS AND EQUIPMENT accessible to children under THREE (3) years of age must SHALL be large enough that they cannot be CHILDREN ARE NOT ABLE TO swallowed or inhaled. THE OBJECT.

- G. TOYS AND EQUIPMENT SHARED BETWEEN CHILDREN WHO PUT THINGS IN THEIR MOUTHS SHALL BE SANITIZED AS NEEDED OR AT LEAST DAILY IN ACCORDANCE WITH HEALTH DEPARTMENT REGULATION 6-209.
- H.G. Toys, FURNISHING AND EQUIPMENT made of brittle, easily breakable plastic are not permitted for children under FIVE (5) YEARS OF AGE.
- I.H. In the infant nursery, some play equipment from the following list must SHALL be provided: mobiles, PLAY EQUIPMENT, rubber washable toys, rattles, blocks, balls, record player, radio, AND tape player with age appropriate tapes.
- J. Infants and toddlers must SHALL not have access to toys and toy parts that pose a swallowing, CHOKE or inhaling hazard.
- K.H. In the infant nursery, some play equipment from the following list must SHALL be provided: mobiles, rubber washable toys, rattles, blocks, balls, record player, radio, tape player.
- L.I. In the toddler nursery, some play materials easily accessible to children must SHALL be provided from each of the following categories:
 - 1. Gross Motor Development
 - 2. Fine Motor Development
 - 3. Language Development
 - 4. Social Interaction
 - J. Drop-in child care centers must SHALL provide access to indoor large muscle equipment, including, but not limited to, an indoor climbing structure with resilient surface PROTECTIVE SURFACING MEETING NATIONALLY RECOGNIZED STANDARDS underneath AND SURROUNDING IN ACCORDANCE WITH MANUFACTURERES INSTRUCTIONS, an open area for indoor large muscle games, and must SHALL provide large muscle activities at least two times during each six (6) hour period of time.
- 7.702.73 Rest Time Equipment REST PERIODS
- Rev. eff. A. A firm cot or 2-inch mat with a sheet and blanket or other suitable covering must be provided for each preschool child remaining in the center more than 4 hours.
 - A. STAFF ARE AWAKE, ALERT AND SUPERVISING ALL CHILDREN.
 - B. REST TIME/QUIET TIME SHALL BE SCHEDULED APPROPRIATELY FOR EACH CHILD.
 - C. STAFF SHALL COMMUNICATE WITH PARENTS REGARDING THE SLEEPING ARRANGEMENTS FOR THEIR CHILD.
 - D. THE CHILDREN SHALL NOT BE FORCED TO SLEEP. CHILDREN WHO DO NOT SLEEP AFTER THIRTY (30) MINUTES SHALL BE PROVIDED WITH APPROPRIATE QUIET TOYS AND EQUIPMENT TO PLAY WITH SUCH AS BOOKS OR PUZZLES.

- E. EACH CHILD HAS THEIR OWN CRIB, COT, OR BED WITH CLEAN BEDDING.
 ALL BEDDING SHALL BE KEPT IN A SANITARY CONDITION AT ALL TIMES.
- F.B. CRIBS, Cots, FUTONS or pads-MATS must SHALL be spaced at least TWO (2) feet apart on all sides during rest time. Children must SHALL have a safe area in which to rest.
- G. SLEEPING COTS AND MATS SHALL BE OF FIRM CONSTRUCTION AND IN GOOD REPAIR.
- H.C. When the room provided for rest is used for other program activities, the cots, pads, and linens must SHALL be stored in an area that is not included in the required square footage assigned for play space.
- I. COTS SHALL NOT BE STORED WITH SHEETS ON UNLESS THEY DO NOT TOUCH. BEDDING SHALL BE SANITIZED BETWEEN USES BY DIFFERENT CHILDREN.
- J.D. In rooms used for napping, the light must SHALL be dim at nap time to promote an atmosphere conducive to sleep. STAFF SHALL BE ABLE TO OBSERVE THE CHILDREN AT ALL TIMES.
- E. In the infant nursery, individual cribs must be provided that allow sufficient space for the infant's length, size, and movement. Each crib must be sturdy, meet federal Consumer Product Safety Commission standards, and have a firm, comfortable mattress with safe, department-approved plastic sheeting or other type of waterproof material.
- F. In the toddler nursery, a crib, sleeping cot, or 2-inch mat must be provided for each child, and there must be a minimum of 2 feet between each crib or cot. Aisles between cots or cribs must be kept free of all obstructions while cribs are occupied. No child under the age of 2 years should use a cot for sleeping without written permission of the parent or guardian.
 - 1. Individual cribs must provide each toddler with sufficient space for the toddler's length, size, and movement, and must meet federal Consumer Product Safety Commission standards. Each crib must
 - be fitted with a firm, comfortable mattress and heavy plastic sheeting or other type of waterproof material. If individual cribs are used, they must be separated by a sturdy divider from the area used for activities.
 - 2. Sleeping cots and mats must be of firm construction and in good repair.
- G. In the infant nursery, soft bedding materials that could pose a suffocation hazard are not permitted in cribs or playpens.
- H. Infants who fall asleep in a swing or infant seat must be placed in their cribs for the remainder of their nap.
- I. Infants must be placed on their backs for sleeping.
- J. In the toddler nursery, a sheet and a blanket or suitable covering must be provided for each child to be used only by that child.

LOFTS

A. INDOOR LOFTS

- STAFF SHALL BE ABLE TO VISUALLY SEE INTO THE LOFT AREA.
- 2. LOFTS THAT EXCEED EIGHTEEN (18) INCHES OFF THE GROUND REQUIRE PROTECTIVE GUARD RAILS WITH SLATS NO WIDER THAN THREE AND ONE-HALF (3 ½) INCHES APART.
- 3. LOFTS EXCEEDING EIGHTEEN (18) INCHES AND USING A LADDER FOR ACCESS SHALL HAVE A SIX (6) FOOT USE ZONE SURROUNDING THE LADDER. THE USE ZONE SHALL HAVE PROTECTIVE SURFACING MEETING NATIONALLY RECOGNIZED SAFETY STANDARDS FOR THE HEIGHT OF THE EQUIPMENT.
- 4. LOFTS WITH STAIRS SHALL HAVE HANDRAILS.

7.702.8 BUILDINGS AND FACILITIES

7.702.81 Building Site

Rev. eff. 2/1/05

A. General

- Centers can SHALL be located in a private residence only when that portion of the residence to which children have access is used exclusively for the care of children during the hours the center is in operation or AND is separate from the living quarters of the family.
- 2. No other business can SHALL operate in the rooms used by the center during the hours of child care.
- Rooms licensed for specific ages of children canSHALL not be used for other ages of children without the prior written approval of the licensing authority.
- 4. IF THE INFANT AND OR TODDLER PROGRAM IS IN THE SAME BUILDING AS A FACILITY CARING FOR CHILDREN OF OTHER AGES, THE INFANT AND TODDLER ROOMS SHALL BE SEPARATED BY FULL WALLS FROM AREAS FOR OTHER AGE GROUPS. FULL WALLS ARE FLOOR TO CEILING.

B. Infant Nursery

- 1. The infant nursery must SHALL be located on the grade level. AND IN ACCORDANCE WITH THE LOCAL FIRE DEPARTMENT.
- 2. If the infant nursery is in the same building as a facility caring for children of other ages, the infant nursery must SHALL be physically separated in different rooms.
- 3. INFANTS SHALL ONLY BE CARED FOR IN ROOMS LICENSED FOR INFANTS.

C. Toddler Nursery

1. The toddler nursery must SHALL be located on grade level. AND IN ACCORDANCE WITH THE LOCAL FIRE DEPARTMENT.

- 2. If the toddler nursery is combined with a large child care center or an infant nursery, toddler facilities, both indoor and outdoor, must SHALL be completely separate from facilities for other age groups, except as allowed by Section 7.702.83, B, 8 and 9. If the facility wishes to provide opportunities for a toddler to have occasional contact with siblings, plans must SHALL be approved IN WRITING by the department licensing representative.
- 3. TODDLERS SHALL ONLY BE CARED FOR IN ROOMS LICENSED FOR TODDLERS UNLESS OTHERWISE APPROVED.
- 4.3. A toddler nursery located in a drop-in child care center licensed for five (5) or fewer toddlers may SHALL be separated from the rest of the center by a five (5) foot wall.

7.702.82 Building Plans and Construction

- Rev. eff. A. The center must—SHALL comply with applicable state and local building code and zoning regulations.
 - B. Prior to construction, architectural plans for new buildings or for extensive remodeling of existing buildings must—SHALL be submitted for review and approval by the department, the local fire department, CDPHE and the local building department as to appropriateness, adequacy, and suitability for child care functions.

7.702.83 Space Requirements

Rev. eff. 2/1/05

- A. Indoor Area Requirements
 - There must SHALL be open, indoor play space of at least THIRTY (30) square feet of floor space per child OR MEETING THE LISTED SQUARE FOOTAGE REQUIREMENTS AS STATED IN THE CHART BELOW, including space for movable furniture and equipment, AND DIAPERING/CHANGING AREAS. Indoor space must SHALL be exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, STORED SLEEPING EQUIPMENT, closets, laundry, furnace rooms, and space occupied by permanent built-in cabinets and permanent storage shelves inaccessible to children, AND THE DOOR SWING AREA.
 - 3 Child care centers in operation prior to January 1, 1966, and which continue operation under the same governing body, must SHALL provide open indoor play space of at least TWENTY-FIVE (25) square feet of floor space per child, including space for readily movable furniture and equipment, and with the exclusions noted in the preceding-paragraph.
 - **4.** SUFFICIENT SPACE ACCESSIBLE TO CHILDREN SHALL BE PROVIDED FOR CHILDREN TO STORE THEIR PERSONAL ITEMS.
 - 5. 2. Adequate storage space must SHALL be provided for indoor and outdoor equipment and supplies. Space for reserve supplies must SHALL be in addition to the designated/REQUIRED space allotment/SQUARE FOOTAGE for children's play activities.
 - There must be at least 1 diaper change area for each 20 or fewer children in need of diaper changing. Diaper change areas must be

located and arranged so as to provide privacy for older children in need of diaper changing. See also Section 7.702.63, B.

7. 4. Number of Children Allowed in One Room

AGE OF CHILDREN	MAXIMUM NUMBER OF CHILDREN IN A ROOM PER DIVIDED SPACE
6 weeks to 18 months	10 infants
12 months to 18 months	10 infants
12 months to 36 months	20 toddlers/10 toddlers
18 months to 24 months	20 toddlers/10 toddlers
24 months to 36 months	28 toddlers/14 toddlers
30 months to 36 months	28 toddlers/14 toddlers

NOTE: SPACE SHALL BE DIVIDED BY AT LEAST HALF WALLS FOR TODDLER, AND FULL WALLS FOR INFANTS.

Toddler centers licensed prior to 7/1/89 are exempt from the room size requirement.

8. 5. Square Footage Requirement per Child

AGE OF CHILD	SEPARATE FREE PLAY AREA	SEPARATE SLEEP AREA	COMBINED SLEEP AND PLAY AREA
6 weeks to 18 months (infants)	35 square feet	adequate space to accommodate size of cribs and needs of infants and staff	50 square feet
12 months to 36 months (toddlers)	30 square feet	30 square feet	45 square feet
2 1/2 years to 5 years (preschool)			30 square feet
5 years and over (school-age)			30 square feet

- 9. 6. In the infant nursery, the minimum indoor space per infant for sleep and activities is FIFTY (50) square feet. This space is exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry, furnace rooms, and space occupied by permanent built-in cabinets and storage shelves AND DOOR SWING AREA.
 - a. If a separate sleep room is provided, it must SHALL have enough square footage that all babies and cribs are easily accessible to staff members. The activity room must SHALL contain at least THIRTY-FIVE (35) square feet per child. SEPARATE SLEEP ROOMS SHALL NO LONGER BE LICENSED EFFECTIVE (XXXX DATE NEW REGS).

b. If a combination sleep/activity room is used, the sleep area must SHALL be separated by a sturdy divider from the area used for activities, and cribs must SHALL be arranged so that all babies and cribs are easily accessible to staff members.

B. Outdoor Area Requirements

- The center must SHALL provide an outdoor play area that is adjacent to or safely accessible to the indoor facilities. When the area is not adjacent TO THE INDOOR FACILITY, staff members must SHALL accompany children to and from the play area. Drop-in child care centers are not required to provide an outdoor play area.
- The outdoor play area must SHALL provide a minimum of SEVENTY-FIVE (75) square feet of space per child for a group of children using the total play area at any one time AND THE AREA IS SAFELY ACCESSIBLE TO THE INDOOR FACILITY.
- The total play area FOR THE PRESCHOOL AND/OR SCHOOL AGE CHILDREN must SHALL accommodate at least THIRTY-THREE (33) percent of the licensed capacity of the center or a minimum of FIFTEEN-HUNDRED (1500) square feet, whichever is greater.
- 4. THE TOTAL PLAY AREA FOR TODDLER OUTDOOR CLASSROOMS SHALL BE A MINIMUM OF SEVEN-HUNDRED-FIFTY (750) SQUARE FEET IF LICENSED FOR TEN (10) TODDLERS AND ONE-THOUSAND-FIFTY (1050) IF LICENSED FOR FOURTEEN (14) OR MORE TODDLERS.
- 3. The play area SHALL must be fenced HAVE BARRIERS SUCH AS FENCES OR STATIONARY WALLS, or have natural barriers, such as hedges, or stationary walls at least 4 feet high,. THE BARRIER SHALL BE NO MORE THAN THREE AND ONE-HALF (3 ½) INCHES FROM THE GROUND AND AT LEAST FORTY-TWO (42) INCHES HIGH TO PROVIDE AN ENCLOSED PLAY AREA AND to restrict children from unsafe areas.
- The play area must SHALL be designed so that all parts OF THE AREA are visible and, easily AND ACTIVELY supervised.
- 5. The playground OUTSIDE CLASSROOM area must SHALL have at least TWO (2) different types of surfaces. Each type of surface must SHALL cover at least TEN (10) percent of the playground OUTSIDE CLASSROOM area.
- A shaded area in the fenced play area of at least ONE-HUNDRED-FIFTY (150) square feet must-SHALL be provided by means of trees or other cover to guard children against the hazards of excessive sun and heat.
- 7. In the infant nursery, the outdoor play area must SHALL be a minimum of FOUR-HUNDRED (400) square feet.
- 8. In the infant nursery, the outdoor area can be used by TODDLERS other age groups at the center, but it must SHALL not be used by any other group of children while infants are using it.

- 9. In the toddler nursery, the outdoor play area can be shared by infants, but infants and toddlers must SHALL not be allowed to use the play area at the same time.
- 10. ALL OUTDOOR AREAS ACCESSIBLE TO CHILDREN SHALL BE MAINTAINED DAILY IN A SAFE CONDITION BY THE REMOVAL OF: DEBRIS, BROKEN OR WORN PLAY EQUIPMENT, AND ANY OTHER HAZARDS.
- 11. THE PLAY AREAS SHALL BE FREE OF UNPROTECTED WELLS, GREASE TRAPS, CISTERNS, CESSPOOLS, CRAWL SPACES, AND UTILITY EQUIPMENT.
- 12. WATER IN PLAY AREAS, PLAY EQUIPMENT AND WADING POOLS SHALL BE CLEAN AND NOT LEFT TO STAND MORE THAN ONE (1) DAY

7.702.84 Food Preparation Area

Rev. eff. 11/1/98

- A. See the "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado." ADD CITATION
- B. FOOD PREPARATION AND SERVICE AREAS SHALL BE CLEANED AND DISINFECTED IN ACCORDANCE WITH THE LOCAL DEPARTMENT OF HEALTH.
- C. EXCEPT WHEN WHASHING FRUITS AND VEGETABLES STAFF SHALL NOT CONTACT READY-TO-EAT FOOD WITH BARE HANDS. UTENSILS SUCH AS TONGS, SPATULAS, DELI TISSUES OR SINGLE-USE GLOVES SHALL BE USED.
- D. FOOD PRODUCT THERMOMETERS SHALL BE MAINTAINED.

BC. Infant and Toddler Nurseries

- 1. A table, counter, or shelf, separate from the diaper changing area, must SHALL be available for preparing infants' and toddlers' food.
- 2. The nursery must SHALL prepare formula or food in the center's kitchen, or the nursery must SHALL have a second sink or a covered commercial container with a spigot for preparation of formula and food.
- 3. CHILDREN LESS THAN TWO (2) YEARS OF AGE SHALL BE EXCLUDED FROM THE KITCHEN.
- 4. WHEN CHILDREN AGE TWO (2) AND OVER PREPARE FOOD AT THE CENTER, THEY SHALL USE ONLY EQUIPMENT AND APPLIANCES THAT DO NOT PRESENT A SAFETY HAZARD. STAFF TO CHILD RATIOS SHALL BE MAINTAINED.

Rev. eff. A. Toilet facilities for the staff and other adults must be in separate compartments

2/1/05 or separated by a partition from children's facilities, except in centers licensed for

30 or fewer children and in centers with programs of 4 hours or less. FACILITIES

- LICENSED FOR THIRTY-ONE (31) OR MORE CHILDREN AND/OR LICENSED FOR MORE THAN FOUR (4) HOURS PER DAY SHALL HAVE A DESIGNATED BATHROOM OR STALL FOR STAFF AND OTHER ADULTS.
- B. Toilet rooms for children must SHALL be separate from rooms used for other purposes and must SHALL be located on the same floor as the inside play area.
- C. TOILET FACILITIES ACCESSIBLE TO CHILDREN SHALL NOT HAVE LOCKS WITHIN A CHILD'S REACH UNLESS THE LOCK IS EASILY OPENED BY STAFF.
- C. A minimum of one (1) lavatory and one (1) flush toilet must SHALL be provided for each/EVERY 15—TWENTY (20) OR fewer children FOR WHICH THE FACILITY IS LICENSED.
- D. The same toilet facilities must SHALL not be used simultaneously by school-age children of both sexes, and toilets for school-age children must SHALL be separated by partitions to provide privacy.
- E. Toilet facilities are not required for children under 2 years of age.
- E. F. Toilet facilities must SHALL be provided for children TWO (2) years of age and older.
- F. ToiletS rooms for TODDLER AGE children must SHALL be located within the toddler nursery ROOMS.
- G. A diaper changING AREA e table and hand washing sink is required in every toddler nursery.
- H. Toilet rooms for children must SHALL be separate from rooms used for other purposes and must SHALL be located on the same floor as the inside play area INDOOR CLASSROOMS.
- I. H. except that dDrop-in child care centers need not provide a toilet in the toddler nursery if the facility is licensed for ten (10) or fewer toddlers

7.702.86 Office Facilities

- A. Office space USED BY STAFF FOR ADMINISTRATIVE DUTIES SHALL BE PROVIDED. IF AREA IS ACCESSIBLE TO CHILDREN ALL HEALTH AND SAFETY REGULATIONS SHALL BE MET. separate from areas used by children, other than for
- 11/1/98 isolation purposes, must be provided for staff to perform administrative duties.
 - B. CHILDREN BEING CARED FOR IN THE OFFICE SPACE SHALL BE DIRECTLY AND ACTIVELY SUPERVISED AT ALL TIMES. CHILDREN SHALL ONLY BE CARED FOR IN THE OFFICE WHILE BEING SEPARATED FOR ILLNESS OR BEHAVIOR.
 - C.B. The office must SHALL have sufficient space for maintenance and safe storage of CURRENT children's, and staff, AND BUSINESS records and the center's business records.
- 7.702.9 FIRE AND OTHER SAFETY REQUIREMENTS

Rev. eff. 10/1/03

- Buildings must SHALL be kept in good repair and maintained in a safe condition.
- B. Major cleaning is prohibited in rooms occupied by children.
- C. Volatile substances/AND HAZARDOUS ITEMS, INCLUDING BUT NOT LIMITED TO: such as gasoline, kerosene, fuel oil, and oil-based paints, firearms, WEAPONS AND explosives ITEMS, and other hazardous items must SHALL not be stored in any area of the building used for child care.
- D. Plastic bags and sharp tools and instruments, INCLUDING BUT NOT LIMITED TO: FOOD STORAGE BAGS, GROCERY BAGS, SHARP SCISSORS, KNIVES AND TOOLS must SHALL be stored in areas inaccessible to children.
- E. ITEMS LABELED "KEEP OUT OF REACH OF CHILDREN" SHALL BE INACCESSIBLE TO CHILDREN.
- F. APPLICATION OF PESTICIDES IS PROHIBITED DURING CHILD CARE HOURS.
- G.D. Combustibles INCLUDING BUT NOT LIMITED TO: such as cleaning rags, mops, and cleaning compounds must SHALL be stored in well-ventilated areas, separated from flammable materials, and stored in areas inaccessible to children.
- H.E. All heating units, gas or electric, must SHALL be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can SHALL be used for heating purposes. All heating elements, including hot water pipes, must SHALL be insulated or installed in such a way that children can SHALL not come in contact with them.
- I.F. Nothing flammable or combustible can SHALL be stored within THREE (3) feet of a furnace or hot water heater.
- J.G. In rooms used by children, all electrical outlets and POWER STRIPS that are accessible to children must SHALL have protective covers, or safety outlets must SHALL be installed.
- K.H. Except in part-day preschools, permanently located bBattery-powered lights must-SHALL be provided in locations readily accessible to staff in the event of electric power failure. Batteries must SHALL be checked regularly.
- L.I. Closets, attics, basements, cellars, furnace rooms, and exit routes must SHALL be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, and magazines.
- M. Smoking BY STAFF, VOLUNTEERS, VISITORS, AND PARENTS is prohibited during business hours in all areas where child care is provided, IN OUTDOOR PLAY AREAS, ON FIELD TRIPS AND EXCURSIONS, and when transporting children. THE FACILITY SHALL BE IN COMPLIANCE WITH THE INDOOR CLEAN AIR ACT.
- J. Smoking is prohibited during business hours in all areas where child care is provided and when transporting children.

- K. Children under 2 years of age must be excluded from the kitchen. When children age 2 and over prepare food at the center, they may use only equipment and appliances that do not present a safety hazard. Staff-child ratios must be maintained.
- N.L. First aid supplies must—SHALL be maintained, AVAILABLE, and made accessible to staff throughout the center, TO ACCOMPANY ALL ACTIVITIES, and stored in areas A MANNER THAT IS inaccessible to children.
- O.M. All outdoor areas available to FOR children's activities must SHALL be maintained in a safe condition by removal of debris, dilapidated structures, AND broken or worn play equipment.
- P. The center must SHALL identify hazardous, high-risk areas. These areas must SHALL be made inaccessible to children.
- Q. N. Playground OUTSIDE CLASSROOM surfaces must SHALL be checked on a daily basis for the presence of dangerous or other foreign materials.
- R. P. Playground OUTSIDE CLASSROOM equipment must SHALL be checked for safety on a monthly basis. KEPT IN GOOD REPAIR AND MAINTAINED IN A SAFE CONDITION.
- S. O. Window blind cords must SHALL be secured out of children's reach to prevent strangulation.
- T. STAPLES SHALL BE INACCESSIBLE TO CHILDREN UNDER THE AGE OF THREE (3).
- U. THUMB TACKS SHALL BE INACCESSIBLE TO CHILDREN.
- V. CLASSROOM SHALL BE FREE OF TRIPPING HAZZARDS SUCH AS LOOSE RUGS.
- W. HEAVY OBJECTS OR FURNITURE THAT CHILDREN ARE ABLE TO PULL OVER OR DOWN ONTO THEMSELVES IS PROHIBITED.
 1. FURNISHINGS ACCESSIBLE TO CHILDREN SHOULD WITHSTAND BEING PULLED UP ON WITHOUT TOPPLING OVER, SHAKING OR COLLAPSING.
- X. BLEACH WATER SOLUTION SHALL NOT BE SPRAYED WHERE CHILDREN CAN INHALE IT.
- Y. STRINGS, CORDS, ROPES OR ITEMS LONG ENOUGH TO WRAP AROUND A CHILD'S NECK ARE PROHIBITED IN INFANT AND TODDLER CLASSROOMS.
- Z. STYROFOAM AND BALLOONS ARE PROHIBITED IN INFANT, TODDLER AND PRESCHOOL ROOM WITH CHILDREN UNDER THREE (3) PRESENT.
- AA. CHAIRS SHALL NOT BE STACKED OVER THREE (3) HIGH.

7.702.92 Fire Safety

Rev. eff.

A. Every building and structure must SHALL have sufficient,
UNOBSTRUCTED CLEARLY MARKED exits to permit the prompt escape of occupants
in case of fire or other emergency. Additional safeguards must be provided for life safety

in case any single safeguard is ineffective due to some human or mechanical failure.

- B. EXITS SHALL BE AVAILABLE IN EACH CLASSROOMOR A COMMON HALLWAY NOT THROUGH ANOTHER CLASSROOM.
- C. EACH FLOOR SHALL HAVE TWO (2) MEANS OF ESCAPE, FREE FROM OBSTRUCTION IN CASE OF AN EMERGENCY.
- B. Every building or structure must be constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.
- D. C. In every building or structure, exits must SHALL be arranged and maintained so as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied.
- E. No lock or fastening to prevent free escape from the inside of any building can SHALL be installed. Only panic hardware or single-action hardware is permitted on a door or on a pair of doors. All door hardware must-SHALL be within the reach of children.
- F. D. No child of less than first grade school level PRESCHOOL AGE CHILDREN ean SHALL NOT be cared for in areas above or below the main floor of exit unless allowed by the Uniform Building Code and WITHOUT WRITTEN APPROVAL approved by the local fire department.
- G.E. ONE Eexit from each room must SHALL be directly to the exterior of the building or to a common hallway leading to the exterior. THE EXIT PATH SHALL NOT GO THROUGH ANOTHER CLASSROOM TO GET TO THE HALLWAY.
- H.F. Each center must SHALL have at least TWO (2) approved, alternate means of egress EXITING from each floor of the building or to a common hallway leading to the exterior. They must SHALL be at different locations.
- I.G. All stairways, interior and exterior, that are used by children must SHALL be OBSTACLE FREE, AND BE provided with handrails within reach of the children.
- HI. If the center has a security lock on outside exit doors,: the center must obtain written permission from the local fire department; and there must be a written sign attached to the door instructing center staff that the security lock is not to be utilized when children are present at the center.
- G. EXIT DOORS WITH ELECTRONIC SECURITY LOCKS SHALL BE CAPABLE OF MANUAL OPERATION IF POWER IS LOST.
- K. EXIT DOORS WITH DEADBOLT LOCKS SHALL BE KEPT UNLOCKED DURING BUSINESS HOURS, SHALL HAVE A SIGN POSTED INSTRUCTING STAFF TO KEEP THE DOOR UNLOCKED AND SHALL HAVE WRITTEN PERMISSION FROM THE FIRE DEPARTMENT TO HAVE DEAD BOLT LOCKS.
- L. EVERY EXIT SHALL BE CLEARLY VISIBLE, OR THE ROUTE TO REACH IT SHALL BE CONSPICUOUSLY INDICATED. EACH PATH OF ESCAPE SHALL BE CLEARLY MARKED AND POSTED.

- J. Every building and structure must have an automatic or department-approved manually operated fire alarm system to warn occupants of the existence of fire or to facilitate the orderly conduct of fire exit drills.
- L. THE LOCAL FIRE DEPARTMENT SHALL APPROVE THE FIRE ALARM SYSTEM USED TO DETECT THE PRESENCE OF FIRE OR FACILITATE A FIRE EXIT DRILL.
- M. THE DEPARTMENT SHALL APPROVE ANY MANUALLY OPERATED FIRE ALARM SYSTEM USED TO DETECT THE PRESENCE OF FIRE OR FACILITATE A FIRE EXIT DRILL. THE MANUAL SYSTEM SHALL HAVE AN INDEPENDENT CONTINUOUSLY SOUNDING ALARM
- A. Each staff member of the center must SHALL be trained in fire safety AND EMERGENCY DRILLS. INCLUDING BUT NOT LIMITED TO: TORNADO, LOCK DOWN, SEVERE WEATHER, REVERSE EVACUATION AND SHELTER-IN-PLACE.
- B. STAFF SHALL BE ABLE TO DEMONSTRATE THAT EVACUATION EQUIPMENT IS ABLE TO CROSS THE DESIGNATED EVACUATION PATH DURING ALL WEATHER.
- C Fire exit drills must SHALL be held often enough/MONTHLY OR MORE FREQUENTLY TO ENSURE that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine.
- D Fire drills must SHALL be consistent with local fire department procedures/REQUIREMENTS. A record of monthly fire drills held over the past TWELVE (12) months, including date and time of drill, number of adults and children participating, and the amount of time taken to evacuate, must SHALL be maintained by the center.
- E. TORNADO DRILLS SHALL BE HELD MONTHLY FROM APRIL THROUGH SEPTEMBER. A RECORD OF TORNADO DRILLS HELD OVER THE PAST TWELVE (12) MONTHS, INCLUDING DATE AND TIME OF DRILL, NUMBER OF ADULTS AND CHILDREN PARTICIPATING, AND THE AMOUNT OF TIME TAKEN TO EVACUATE, SHALL BE MAINTAINED BY THE CENTER.
- F. LOCKDOWN, REVERSE EVACUATION, SHELTER IN PLACE AND SEVERE WEATHER DRILLS SHALL BE HELD AT LEAST TWO (2) TIMES EACH PER YEAR. A RECORD OF ALL DRILLS HELD OVER THE PAST TWELVE (12) MONTHS, INCLUDING DATE AND TIME OF DRILL, NUMBER OF ADULTS AND CHILDREN PARTICIPATING, AND THE AMOUNT OF TIME TAKEN TO EVACUATE, SHALL BE MAINTAINED BY THE CENTER.
- G. IF THE LOCAL FIRE DEPARTMENT DOES NOT REQUIRE A FULL ALARM DRILL EACH MONTH, A DEPARTMENT APPROVED MANUAL SYSTEM SHALL BE USED DURING THOSE MONTHS.
- GD. Drills must SHALL be held at unexpected times and under varying conditions to simulate the conditions of an actual fire. EMERGENCY.
- DE. Drills must emphasize orderly evacuation under proper discipline rather than speed. No running or horseplay should be permitted.
- EF. Drills must SHALL include suitable procedures for ensuring that all persons in the building, AND EACH CLASS IN THE CHILD CARE PROGRAM, or all persons subject to the drill, actually participate.

FG. Fire alarm equipment must be used regularly in the conduct of fire exit drills.

GH. If appropriate to the location of the center, tornado drills must be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. A record of tornado drills held over the past 12 months must be maintained by the center.

7.702.100 RECORDS AND REPORTS

A. ELECTRONIC AND PAPER FILES SHALL BE AVAILABLE UPON REQUEST

7.702.101 Children's Records

Rev. eff. The center must maintain and update 11/1/98 annually a record on each child that includes:

- A. An admission record must_SHALL be completed for each child prior to or at the time of the child's admission and updated annually, WITH PARENT/GUARDIAN SIGNATURE AND DATE, unless otherwise specified in these rules. The admission record must SHALL include A SPACE TO PROVIDE THE FOLLOWING INFORMATION IF APPLICABLE:
 - 1. The child's full name:
 - 2. CHILD'S bBirth date:
 - CHILD'S current address;
 - 4. CHILD'S date of enrollment:
 - 5. PARENT(S) AND GUARDIAN(S) HOME ADDRESS;
 - 6. PARENT(S) AND GUARDIAN(S) EMAIL ADDRESS;
 - 7. PARENT(S) AND GUARDIAN(S) TELEPHONE NUMBERS, INCLUDING HOME, WORK, CELL AND PAGER NUMBERS (IF THE PARENT CHOOSES TO PROVIDE THOSE NUMBERS);
 - 8. PARENT(S) AND GUARDIAN(S) EMPLOYER NAME
 - 9 PARENT(S) AND GUARDIAN(S) EMPLOYER'S ADDRESS; AND
 - 10. ANY SPECIAL INSTRUCTIONS AS TO HOW THE PARENT(S) OR GUARDIAN(S) SHALL BE REACHED DURING THE HOURS THAT THE CHILD IS IN CARE AT THE CENTER.
 - 12. NAME, ADDRESS AND PHONE NUMBERS OF PERSONS AUTHORIZED TO TAKE THE CHILD FROM THE CENTER.
 - 13. NAME, ADDRESS AND PHONE NUMBERS OF PERSONS WHO WILL ASSUME RESPONSIBILITY FOR THE CHILD IN THE EVENT OF AN EMERGENCY AND THE PARENTS ARE NOT IMMEDIATELY REACHED.
 - 14. NAME, ADDRESS, AND TELEPHONE NUMBER OF THE CHILD'S HEALTH CARE PROVIDER, DENTIST (IF APPLICABLE), OR PEDADONTIST (IF APPLICABLE), AND HOSPITAL OF CHOICE.
 - 15. HEALTH ADMISSION INFORMATION, INCLUDING A HEALTH CARE PLAN, CHRONIC MEDICAL CONDITIONS, ALLERGIES, IMMUNIZATION HISTORY AND MEDICATION AUTHORIZATIONS.
 - 16. A DATED WRITTEN AUTHORIZATION FOR EMERGENCY MEDICAL CARE SIGNED AND UPDATED ANNUALLY/KEPT CURRENT BY THE PARENT OR GUARDIAN.
 - 17. ALL WRITTEN AUTHORIZATIONS FROM A PARENT OR GUARDIAN.
- A. The child's full name, birth date, current address, and date of enrollment.
 - B. Names and home and employment addresses and telephone numbers of parents or quardians.

- C. Any special instructions as to how the parents or guardians can be reached during the hours the child is at the center.
- B.D. Names, addresses, and telephone numbers of persons authorized to take the child from the center.
- C.E. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if parents or guardians cannot be reached immediately.
- D.F. Name, address, and telephone number of the child's physician and hospital of choice.
- E.G. Health information, including, medical report, chronic medical problems, immunization history.
- F.H. A dated written authorization for emergency medical care signed and updated annually/kept current by the parent or guardian. The authorization must be notarized if required by the local hospital, clinic, or emergency health care facility.
- G.I. ALL Wwritten authorizationS from a parent or guardian. for the child to participate in field trips or excursions, whether walking or riding.
- B. THE CENTER SHALL MAINTAIN AND UPDATE ANNUALLY A RECORD ON EACH CHILD THAT INCLUDES:
 - 1. ALL ENROLLMENT AND ADMISSION RECORDS LISTED ABOVE.
 - 2.J. Injury, ACCIDENT, and SERIOUS illness records AND ACCIDENT, INJURY, FATALITY FORM.
 - 3.K. Reports INCLUDING BUT NOT LIMITED TO: CHILD ABUSE, OFFICIAL REPORTS FILED WITH THE COLORADO DEPARTMENT OF HUMAN SERVICES REGARDING THE LOSS OF THE CHILD, serious ILLNESS, injuries and accidents occurring during care that result in the hospitalization or death of a child.
 - 4.J. REPORTS TO THE PARENT OR GUARDIAN INFORMING THEM OF ACCIDENTS RESULTING IN INJURY.
 - 5. HEALTH CARE PLANS, immunization history, MEDICATION AUTHORIZATIONS AND MEDICATION LOGS.
 - 6. K. DOCUMENTATION OF REFERRALS GIVEN TO PARENTS OR GUARDIANS REGARDING CHILD DEVELOPMENT ISSUES.
 - 7. L. Significant observations of the child's development.
 - 8M. A record of parent conferences, including dates of conferences and names of center staff and parents or guardians involved.
 - 9. N. A DATED PARENT, GUARDIAN, OR PROVIDER SIGNATURE IS REQUIRED WITH EACH UPDATE IN A CHILD'S RECORDS.

7.702.102 Staff Records

Rev. eff. A. The center office must SHALL maintain a CURRENT record for each staff member that includes the following:

- 1. Name, address, telephone number, and birth date of the individual.
- Verification of education OR COLORADO EARLY CHILDHOOD PROFESSIONAL CREDENTIAL, work experience, employment, training, and completion of first aid and CPR courses, MEDICATION ADMINISTRATION, STANDARD PRECAUTIONS OR OTHER REQUIRED TRAININGS.
- 3. Immunization record and health examination reports.
- 4. Date of employment- AND DATE OF TERMINATION.
- 5. MANDATORY CHILD ABUSE REPORTING STATEMENT SIGNED AND DATED ANNUALLY AS PER COLORADO REVISED STATUTES (C.R.S.)
- SIGNED PERJURY STATEMENT.
- Names, addresses, and telephone numbers of persons to be notified in the event of an emergency.
- 6. Information received from the State Department's automated system and the Colorado Bureau of Investigation (may be retained in a confidential file). FACTOR IN HOUSE BILLS 1102, 1145
- B. Each staff member's personnel file must SHALL contain all required information within THIRTY (30) working days of the first day of employment, UNLESS REGULATION REQUIRES DOCUMENTATION PRIOR TO WORKING WITH CHILDREN OR WITHIN A TIME FRAME LESS THAN THIRTY (30) DAYS. STAFF RECORDS SHALL BE KEPT CURRENT.

7.702.103 Administrative Records and Reports

- A. The following records must SHALL be on file at the center OR A CENTRAL ADMINISTRATIVE OFFICE:
 - Records of enrollment, daily attendance for each child, and daily record
 of the time the child arrives at and departs from the center- FOR THE
 PAST TWELVE (12) MONTHS SHALL BE ON FILE AT THE CENTER.
 PREVIOUS THREE (3) YEARS SHALL BE ON FILE AT EITHER THE
 CENTER OR A CENTRAL OFFICE.
 - Current health department inspection report issued within the past TWENTY-FOUR (24) months SHALL BE ON FILE AT THE CENTER. PREVIOUS REPORTS SHALL BE ON FILE AT THE CENTER OR A CENTRAL OFFICE.
 - 3. Current fire department inspection report issued within the past TWENTY-FOUR (24) months. SHALL BE ON FILE AT THE CENTER. PREVIOUS REPORTS SHALL BE ON FILE AT THE CENTER OR A CENTRAL OFFICE.
 - 4. A list of current staff members, substitutes, and staffing patterns.—FOR THE PAST TWELVE (12) MONTHS SHALL BE ON FILE AT THE CENTER. PREVIOUS THREE (3) YEARS SHALL BE ON FILE AT EITHER THE CENTER OR A CENTRAL OFFICE.

- Copies of menus. FOR THE PAST TWELVE (12) MONTHS SHALL BE ON FILE AT THE CENTER. PREVIOUS THREE (3) YEARS SHALL BE ON FILE AT EITHER THE CENTER OR A CENTRAL OFFICE.
- A record of visitors to the center- FOR THE PAST TWELVE (12)
 MONTHS SHALL BE ON FILE AT THE CENTER. PREVIOUS THREE
 (3) YEARS SHALL BE ON FILE AT EITHER THE CENTER OR A
 CENTRAL OFFICE.
- B. Each center must immediately SHALL report in writing to the Colorado Department of Human Services any accident, INJURY or illness occurring at the center that resulted in medical treatment by a physician or other health care professional PROVIDER, hospitalization, or death. This report must SHALL be made ON THE ACCIDENT, INJURY, FATALITY REPORT within FOURTY-EIGHT (48) hours after the accident or illness occurred. OR THE FACILITY WAS MADE AWARE OF THE CHILD RECEIVING MEDICAL TREATMENT.
- C. A report about aN ACCIDENT, INJURY, ILLNESS INCLUDING A fatality SHALL must include:
 - 1. The child's name, birth date, address, and telephone number.
 - The names of the child's parents or guardians and their address and telephone number if different from that of the child.
 THE NAME, ADDRESS, AND PHONE NUMBERS OF THE CHILD'S PARENTS OR GUARDIANS
 - 3. Date of the INCIDENT OR fatality.
 - 4. Brief description of the incident or illness. leading to the fatality.
 - 5. Names, and—addresses AND PHONE NUMBERS of witnesses or persons who were with the child at the time of death. INCIDENT.
 - 6. Name and address of police department or authority to whom WHICH the report was made IF APPLICABLE.
- D. The center must submit to the department within 48 hours a written report about any child who has been lost from the center and for whom the local authorities have been contacted. Such report must indicate: EACH CENTER must immediately SHALL REPORT IN WRITING TO THE COLORADO DEPARTMENT OF HUMAN SERVICES WITHIN FOURTY-EIGHT (48) HOURS A WRITTEN LOST CHILD REPORT FOR ANY CHILD WHO HAS BEEN LOST WHILE IN THE CARE OF THE CENTER, INCLUDING A CHILD WHO INTENTIONALLY LEAVES THE CENTER OR FIELD TRIP. THIS INCLUDES ANY CHILD WHOSE LOCATION IS UNKOWN TO STAFF AND FOR WHOM THE LOCAL AUTHORITIES HAVE BEEN CONTACTED, OR A CHILD WHO IS FOUND BEFORE AUTHORITIES ARE CONTACTED.

A LOST CHILD REPORT SHALL INCLUDE:

- 1. The name, birth date, address, and telephone number of the child.
- The names of the parents or guardians and their address and telephone number if different from those of the child. THE NAME, ADDRESS, AND PHONE NUMBERS OF THE CHILD'S PARENTS OR GUARDIANS.

- The date when the child was lost.
- 4. The location, time, and circumstances when the child was last seen.
- 5. Actions taken to locate the child.
- 6. The name of the staff person OR PERSONS supervising the child.

E. CONTROL OF COMMUNICABLE ILLNESS

- The center must SHALL report to the Colorado Department of Public Health and Environment or its local unit any communicable illness DISEASE, including but not limited to CHICKEN POX, measles, mumps, CAMPYLOBACTER, diphtheria E.COLI 0157:H7, CRYPTOSPORIDIOSIS, PERTUSSIS, rubella, tuberculosis, shigella, hepatitis, meningitis, salmonella, or giardia, contracted by a staff member or a child at the center, THE PROVIDER SHALL IMMEDIATELY NOTIFY THE PARENTS OR GUARDIANS OF ALL CHILDREN IN CARE AND REPORT TO THE LOCAL COUNTY DEPARTMENT OF HEALTH OR THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT.
- 2. ANY INDIVIDUAL DIAGNOSED WITH A REPORTABLE COMMUNICABLE ILLNESS SHALL BE EXCLUDED FROM CONTACT WITH CHILDREN IN CARE AT THE CENTER FOR A PERIOD OF TIME DETERMINED BY THE INDIVIDUAL'S HEALTH CARE PROVIDER OR BY THE LOCAL HEALTH DEPARTMENT.
- 3. PARENTS SHALL BE NOTIFIED IF CHILDREN IN THEIR CHILD'S ROOM ARE DIAGNOSED WITH A COMMUNICABLE DISEASE BY A HEALTH CARE PROVIDER.

7.702.104 Confidentiality and Retention

Rev. eff. 11/1/98

- A. The confidentiality of all personnel and children's records must SHALL be maintained. See Section 7.701.7 in the General Rules for Child Care Facilities.
- B. Personnel and children's records must SHALL be available, upon request, to authorized personnel of the department.
- C. If records for organizations having more than one center FACILITY are kept in a central fileOFFICE, duplicate identifying and emergency information for both staff and children must SHALL also be kept on file at the EACH center attended by the child and where the staff member is assigned.
- D. The records of children and personnel must SHALL be maintained by the center for at least THREE (3) years.

7.703 - 7.704 None

